

Quarterly Report of Non-preaching Deacon/Trial Deacon

Name _____ Date ____/____/____

Address _____

City/State/Zip _____

Name of Local Church _____

Deacon Trial Deacon

Are you striving to be a good example for other believers _____? In cooperation with the pastor, do you take an active role in the business of the local church _____?

Have you been active in visitation _____? Do you maintain an active prayer life _____? Do you have family devotions regularly _____? Do you study the

Scriptures on a regular basis _____? Number of times assisted in or taken part in the following ordinances this quarter: Lord's Supper _____, Feet Washing

_____, Baptizing _____. Have you been faithful in the stewardship of tithing and giving _____? Do you volunteer time and labor toward the physical

maintenance of the local church property _____? What positions, besides deacon, do you hold in the local church: Sunday school superintendent _____, Teacher

_____, Care Group Leader _____, Other _____. In personal evangelism this quarter, how many have been saved _____, Sanctified _____,

baptized with the Holy Ghost _____? Are you a reader of the *White Wing Messenger* _____? Are you a CPMA member _____? Tracts distributed

this quarter _____. Number you have baptized in water _____. Number of members you have received into the church by covenant _____.

Homes visited _____.

Remarks:
