

SOUTHERN DISTRICT – LCMS
Elected Officer Information Form for _____
These officers were installed on: _____

Please send a completed copy within 30 days after elections are held to the:
SOUTHERN DISTRICT 100 MISSION DRIVE SLIDELL, LA 70460-5221

Note: After completing the form, you can save the document and e-mail to the District Office at s.laird@southernlcms.org or fax to us at 985-871-9696. It is important that you provide the e-mail addresses, as in most cases, we use the e-mail as the primary means of communication. Remember to include the area code for the phone number. Thanks.

Church:	Pastor:
E-Mail:	Cell Phone:
Address:	E-Mail:
	Office Secretary:
	E-Mail:
Phone:	
Fax:	Website:

PRESIDENT:

Name:	Home/cell #:	E-Mail:
Address:		

VICE-PRESIDENT:

Name:	Home/cell #:	E-Mail:
Address:		

TREASURER

Name:	Home/cell #:	E-Mail:
Address:		

COUNCIL/VOTER'S SECRETARY:

Name:	Home/cell #:	E-Mail:
Address:		

EVANGELISM/OUTREACH:

Name:	Home/cell #:	E-Mail:
Address:		

STEWARDSHIP:

Name:	Home/cell #:	E-Mail:
Address:		

ELDERS/LAYMINISTRY/DEACON:

Name:	Home/cell #:	E-Mail:
Address:		

HUMAN CARE/SOCIAL MINISTRY/OLDER ADULT MINISTRY

Name:	Home/cell #:	E-Mail:
Address:		

CHILDREN'S MINISTRY/SUNDAY SCHOOL LEAD PERSON (Superintendent):

Name:	Home/cell #:	E-Mail:
Address:		

YOUTH MINISTRY LEADER:

Name:	Home/cell #:	E-Mail:
Address:		

RECRUITMENT & SCHOLARSHIP CONTACT PERSON:

Name:	Home/cell #:	E-Mail:
Address:		