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 <u>s.laird@southernlcms.org</u> 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:			
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