

**THE CHRISTIAN METHODIST EPISCOPAL CHURCH
QUARTERLY CONFERENCE REPORT
CHRISTIAN YOUTH FELLOWSHIP REPORT**

DATE: _____

CHURCH: _____

Presiding Elder: Rev. Dr. Curlee L. Adams and members of the _____ Quarterly Conference, it is a privilege to submit this report for the quarter beginning _____ and ending _____

MEMBERSHIP ACCOUNTABILITY

Number of Members: _____

Number of Meetings Held: _____

Number Members Attending: _____

Number of Officers: _____

Number of Directors: _____

Number of Members Attending District Meetings/Functions: _____

Number of Members Attending the General Conference: _____

When do you have your meetings? _____

What is the makeup of your meetings? _____

What materials do you use? _____

Do you use CME Literature and Catechism? _____

Number of Members attending the Annual CME Convocation? _____

Member involved in social or civic activities: _____

ACTIVITIES

Training Workshops Conducted and Nature of Workshop: _____

Number of Members Attending: _____

Special Activities Planned/Completed: _____

Do you have the following Commissions?

Faith and Growth: _____

Chairperson: _____

Outreach and Witness: _____

Chairperson: _____

Stewardship/Fellowship: _____

Chairperson: _____

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CHRISTIAN YOUTH FELLOWSHIP REPORT (Continued)**

STEWARDSHIP

Amount Received from Members: _____

Amount Received from Activities: _____

Total Amount Received: _____

Amount dispersed for Expenses: _____

Total Amount Available: _____

SPIRITUAL GROWTH

Members Attending Morning Worship: _____

Members Attending Sunday School: _____

Members Attending Midweek Services: _____

Members paying Tithes in the local Church: _____

Submitted,

President: _____

Pastor: _____
(Name of Pastor)

Presiding Elder: _____
Rev. Dr. Curlee L. Adams

Presiding Bishop _____
Bishop Sylvester Williams, Sr.