

Parish Officers and Contacts 2010 – Annual Statistical Return
Diocese of Fredericton

Parish: _____	Incumbent: _____
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At the parish meeting held on _____ 2010, the following persons were elected to the offices indicated. Other contacts have been designated as noted.

Signed: _____ Date: _____

WARDEN annual elected

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

WARDEN annual elected

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

TREASURER corporation elected

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

VESTRY CLERK corporation elected

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

SYNOD DELEGATE

annual elected

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

SYNOD DELEGATE

annual elected

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

SYNOD DELEGATE

annual elected

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

SYNOD SUBSTITUTE

annual elected

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

SYNOD SUBSTITUTE

annual elected

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

SYNOD SUBSTITUTE

annual elected

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

PARISH ADVISORY COMMITTEE CHAIR

corporation elected

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

PARISH ADVISORY COMMITTEE SECRETARY

corporation elected

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

MUSIC LEADER

parish designated

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

PWRDF REPRESENTATIVE

parish designated

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

YOUTH CONTACT

parish designated

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

MEN'S MINISTRY CONTACT

parish designated

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

MOTHERS' UNION BRANCH LEADER

parish designated

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

ACW PRESIDENT

parish designated

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		

Name:	_____		
Address:	_____	Phone: ()	[h]
	_____	Phone: ()	[o]
E-mail	_____		