



# District of Columbia Baptist Convention

## Annual Church Report 2020

Information from September 1, 2019 – August 31, 2020

Due date September 15, 2020

**NAME OF  
CHURCH:** \_\_\_\_\_

Pastor: \_\_\_\_\_

Employer ID Number (EIN): \_\_\_\_\_

Church mailing address: \_\_\_\_\_

Phone: \_\_\_\_\_

\_\_\_\_\_

Fax: \_\_\_\_\_

\_\_\_\_\_

E-mail: \_\_\_\_\_

Church meeting address: \_\_\_\_\_

Website: \_\_\_\_\_

\_\_\_\_\_

This annual Report collects statistical, leadership, and financial information. The data is widely used for variety of purposes, including:

- Developing strategic priorities, programming, and initiatives for DCBC's work with member congregations.
- Determining **five** Council of Church Representatives for the Annual Gathering.
- Regional and national directories (DCBC and ABC)
- Statistical reporting within DCBC and national bodies. Statistics results are often used by funders.
- Congregational Profiles for pastoral search committees and strategic planning.
- Per capita calculations for financial reports and recognitions.
- Provide historical information for your church.

Our denominational bodies benefit from having the most accurate collective information possible on our congregations. Please carefully review and enter requested information.

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# Annual Church Report 2020

## Statistics

**NAME OF CHURCH:** \_\_\_\_\_

MEMBERSHIP INFORMATION	RACIAL/ETHNIC <i>(Check boxes that apply)</i>
Total Church Membership:	<input type="checkbox"/> African (Specify) _____
Total Resident Active Members :	<input type="checkbox"/> Asian (Specify) _____
Total Resident Inactive Members :	<input type="checkbox"/> Black (African American) _____
New Member by Baptism:	<input type="checkbox"/> Caucasian (European American) _____
New Member by Letter or Other:	<input type="checkbox"/> Hispanic/Latino _____
Member Lost by Death:	<input type="checkbox"/> Other _____
Member lost by letter or other:	
<b>BAPTISMS</b>	<b>FINANCIAL INFORMATION</b> <i>(Round dollar amount to nearest dollar.)</i>
11 Years and under:	a. Church Budget: _____
12 to 17 years of age:	b. Gift to DCBC: _____
18 to 29 years of age:	c. Gift to NCAMO (The Blessing): _____
30 and up	<i>DCBC offers a plethora of trainings throughout the year. A few of the trainings are listed below. Please check any classes of interest:</i>
TOTAL BAPTISMS:	<input type="checkbox"/> Church Clerk
<b>SUNDAY SCHOOL/BIBLE STUDY/SMALL GROUPS</b>	<input type="checkbox"/> Deacon/Deaconess
Children (Birth – 11):	<input type="checkbox"/> Disaster Relief
Youth (12 – 17):	<input type="checkbox"/> Grant Writing/Funding
Young Adults:	<input type="checkbox"/> Human Resource
Adults:	<input type="checkbox"/> Trustee
Seniors:	<input type="checkbox"/> Usher
Total Average Attendance:	<input type="checkbox"/> Vacation Bible School

# Annual Church Report 2020

## Programs

**NAME OF CHURCH:**

<b>CHILDREN &amp; YOUTH</b> <i>Please let us now about your Children and/or Youth Ministry programs. Example: Youth Evangelism Ministry, 3<sup>rd</sup> Saturday(s)</i>	<b>OUTREACH/MISSIONS</b> <i>Check the box(es) that apply and provide details below.</i>
	<input type="checkbox"/> ADVOCACY
	<input type="checkbox"/> BENEVOLENCE
	<input type="checkbox"/> COMMUNITY
	<input type="checkbox"/> FOOD
	<input type="checkbox"/> EVANGELISM
	<input type="checkbox"/> HOMELESS
<b>YOUNG ADULT (18 - 35)</b> <i>Please let us now about your Young Adult Ministry programs. Example: Young Adult Prayer Meeting, Every Wednesday 7pm</i>	<b>OUTREACH/MISSION DETAILS</b> <i>Please let us now about your outreach/mission ministries and how often the events occur. Example: Food Pantry Every 1<sup>st</sup> Saturday.</i>
<b>TOTAL PROGRAMS:</b>	
<b>ADULT/SENIORS/OTHER PROGRAMS</b> <i>Please let us now about your Adult and/or Senior Ministry programs. Example: Noon Prayer Meeting ,Wednesday 12pm</i>	
<b>TOTAL SENIOR PROGRAMS:</b>	
<b>TOTAL OTHER PROGRAMS:</b>	<b>Total Outreach/Mission Programs:</b> _____

# Annual Church Report 2020

## Church Staff Leadership Directory

**NAME OF CHURCH:** \_\_\_\_\_

*Listings of Elected Officers are requested on the next page.*

Please list staff who is “permanently” employed with primary responsibility for broad areas of the church’s ministry such as: Pastoral, Music, Education (Adult, Youth, Children, Small Groups), Administration (Secretary, Business Manager), Directors for Women’s and Men’s Ministries, Community Outreach. Please use additional sheet if needed.

### ORDAINED STAFF

Position: _____  Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name: _____
	Address: _____
	Home Phone: _____ <input type="checkbox"/> Unlisted
	Cell Phone: _____ <input type="checkbox"/> Unlisted
	Email Address: _____
Position: _____  Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name: _____
	Address: _____
	Home Phone: _____ <input type="checkbox"/> Unlisted
	Cell Phone: _____ <input type="checkbox"/> Unlisted
	Email Address: _____
Position: _____  Part Time: <input type="checkbox"/> Full Time: <input type="checkbox"/>	Title & Name: _____
	Address: _____
	Home Phone: _____ <input type="checkbox"/> Unlisted
	Cell Phone: _____ <input type="checkbox"/> Unlisted
	Email Address: _____
Position: _____  Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name: _____
	Address: _____
	Home Phone: _____ <input type="checkbox"/> Unlisted
	Cell Phone: _____ <input type="checkbox"/> Unlisted
	Email Address: _____
Position: _____  Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name: _____
	Address: _____
	Home Phone: _____ <input type="checkbox"/> Unlisted
	Cell Phone: _____ <input type="checkbox"/> Unlisted
	Email Address: _____
Position: _____  Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name: _____
	Address: _____
	Home Phone: _____ <input type="checkbox"/> Unlisted
	Cell Phone: _____ <input type="checkbox"/> Unlisted
	Email Address: _____

# Annual Church Report 2020

## Elected Leadership Directory

**NAME OF CHURCH:** \_\_\_\_\_

Please update our listing of elected laity who have primary responsibility for leadership areas of the church's ministry such as: Music, Education (Adult, Youth, Children, Small Groups), Administration & Finance (Church Clerk, Treasurer), Directors for Women's & Men's Ministries, Community Outreach, Vacation Bible School, Chairpersons of Deacons & Trustees, etc.

**Please use additional sheet if needed.**

Position:  Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name: Address: Home Phone: <input type="checkbox"/> Unlisted Cell Phone: <input type="checkbox"/> Unlisted Email Address:
Position:  Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name: Address: Home Phone: <input type="checkbox"/> Unlisted Cell Phone: <input type="checkbox"/> Unlisted Email Address:
Position:  Part Time: <input type="checkbox"/> Full Time: <input type="checkbox"/>	Title & Name: Address: Home Phone: <input type="checkbox"/> Unlisted Cell Phone: <input type="checkbox"/> Unlisted Email Address:
Position:  Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name: Address: Home Phone: <input type="checkbox"/> Unlisted Cell Phone: <input type="checkbox"/> Unlisted Email Address:
Position:  Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name: Address: Home Phone: <input type="checkbox"/> Unlisted Cell Phone: <input type="checkbox"/> Unlisted Email Address:
Position:  Part-Time: <input type="checkbox"/> Full-Time: <input type="checkbox"/>	Title & Name: Address: Home Phone: <input type="checkbox"/> Unlisted Cell Phone: <input type="checkbox"/> Unlisted Email Address:

# Annual Church Report 2020

## Other Ordained Ministers

**NAME OF CHURCH:** \_\_\_\_\_

Please list names and addresses of all other ordained ministers who are members of your church and indicate all appropriate **STATUS** designations:

**CH** – Chaplain (military, hospital, factory, institution, college, etc.)

**CW** – Convention Worker (person working for ABC, BWA, PNBC or SBC),

**EM** – Evangelist (Music),

**EP** – Evangelist (Preaching),

**I** – Inactive,

**O** – Other church-related worker (pastoral, counselor, seminary student, teacher of Bible, etc.),

**PI** – Part-time Interim (for a short time),

**R** – Retired,

**SW** – State Worker (person working for any DCBC agency or institution).

### OTHER CHURCH MEMBERS WHO ARE ORDAINED MINISTERS

Title & Name	Status:
Address:	Phone:
Title & Name:	Status:
Address:	Phone
Title & Name	Status:
Address:	Phone:

### CHURCH MEMBERS ORDAINED DURING 2020

Title & Name	Status:
Address:	Phone:
Title & Name:	Status:
Address:	Phone
Title & Name	Status:
Address:	Phone:

### MINISTERS DECEASED DURING 2020

Name:
Name:

# Annual Church Report 2020

# Annual Letter

NAME OF CHURCH: \_\_\_\_\_

Please write a **one-page** letter **using bullet dots style** about what has happened of significance in your church during the past 12 months. It could include pastoral changes, new buildings or programs, spiritual developments, or what-ever church wishes to record. This letter will be permanently bound and kept as a significant historical document by the DC Baptist Convention. It will be useful to persons compiling a history of your church and/or the DC Baptist Convention.

[illegible]

Annual Church Report 2020  
**Annual Gathering Representative Registration**

**NAME OF CHURCH:** \_\_\_\_\_

District of Columbia Baptist Convention Annual Gathering  
Thursday & Friday  
October 22-23, 2020

No.	Name(s)
1.	
2.	
3.	
4.	
5.	

*“Active member churches in good standing are entitled to five voting representatives, one representative to be the Senior Pastor or his/her designee, the other representative chosen according to the member-church’s polity.” Bylaws Article 6.3*

Member churches are encouraged to send as many non-voting participants as they wish to the Annual Gathering. Non-voting participants may speak, but have no vote.