

**OFFICIAL CHANGE OF PRESBYTERY ROLLS
STATUS OF CHURCHES/MISSIONS**

EMAIL: 1) records@pcanet.org (or use the Presbytery Clerks Website) **and** 2) the dismissing or receiving presbytery when a transfer is being reported. Use this form to ensure all information is included.

- or -

HARD COPY: complete applicable portion(s) and send copies by fax or regular mail to 1) PCA Stated Clerk's Office, 1700 N. Brown Rd., Suite 105, Lawrenceville, GA 30043, fax 678-825-1001 and 2) the dismissing or receiving presbytery when a transfer is being reported..

PLEASE TYPE OR PRINT USING BLACK INK

Effective Date of Change _____
(Report within 10 days of change)

Name of Church _____ Mission Church

Address of Church _____

City _____ State _____ Zip _____ Phone _____

Presbytery _____

Mailing Address (if different from above) _____

City _____ State _____ Zip _____

Church Phone (_____) _____ Church Fax (_____) _____

Date formed as Mission Work _____ Date Organized _____

Date Received _____ From _____

Name of previous affiliation

Date Dissolved _____ Date Transferred _____ To _____

Name of body to which transferred

Other Change of Status: to particular church
 to mission church
 other _____

Pastor of Church (first) _____ (middle) _____ (last) _____

Clerk of Session _____ Telephone _____

Address _____

City _____ State _____ Zip _____

NOTE: If both a church and a pastor change status, please also complete form 022, the **OFFICIAL CHANGE OF PRESBYTERY ROLLS – MINISTER**

Signed _____

Date _____