

**OFFICIAL CHANGE OF PRESBYTERY ROLLS
NAME/ADDRESS/PHONE**

EMAIL: records@pcanet.org (or use the Presbytery Clerks Website)

- or -

HARD COPY: complete applicable portion(s) and send copies by fax or regular mail to the PCA Stated Clerk's Office, 1700 N. Brown Rd., Suite 105, Lawrenceville, GA 30043, fax 678-825-1001

PLEASE TYPE OR PRINT USING BLACK INK

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

CHURCH CHANGES

New Name of Church _____

Old Name of Church _____

New Address - Meeting _____
Street

city state zip
Mailing (if different) _____
street

Old Address _____
city state zip
street

city state zip

New Church Phone (____) _____ **New Church Fax** (____) _____

Signed _____ **Date** _____
Stated Clerk of Presbytery

MINISTER/CLERK OF SESSION CHANGES

Name _____ ☐ Minister ☐ Clerk

(If new Clerk of Session, please give name of former Clerk)

New Address _____
Street

city state zip

New Home Phone (____) _____ **New Office Phone** (____) _____
(if different from church)

Signed _____ **Date** _____
Stated Clerk of Presbytery