

Trustees Report/Parsonage Survey

This form is to be completed even if you do not have a parsonage.

Charge _____ Date _____

Church(es) _____

Pastor _____ District Superintendent _____

TRUSTEES

- Are you incorporated? _____
- Has your church or charge made changes in property matters (values, purchases, improvements)? _____ (If “Yes” provide written report)
- Adequately insured? _____ Name of Insurance Company _____
(For “adequately insured” see the Trustees Report in the Annual Conference Journal)
- Workers’ Compensation? _____ (According to state law, every church **MUST** have Workmen’s Compensation that covers the pastor and any other paid employees.)
- Does your church have a cemetery? _____ If “yes”, is it an Association? _____
- Parsonage survey conducted in past 12 months? _____ (Attach written report)

PARSONAGE SURVEY (Required from SPRC/Trustees)

ANNUAL PARSONAGE REVIEW

This walk-through review should be done together by a member of the Pastor-Parish Relations Team, a member of the Trustees and the pastor. As a rule of thumb, would you and/or members of your congregation be willing to live in the parsonage as it is at the present? ***This form will be requested at the Annual Charge Conference meeting.*** ¶12533.4 in The Book of Discipline 2016.

Name of Person Who Conducted the Review:

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Date of Review: _____

1. Does your church rent the parsonage?

2. If your church does rent the parsonage, how much is the monthly rent? _____

3. If your church does rent the parsonage, is there a lease agreement? _____

4. List Any Major Repairs or Purchases During the Past Year

5. List Any Concerns or Repairs That Have Been Detected That Need to be Addressed

6. Have These Concerns Been Reported to Pastor-Parish Relations Team and Trustees?

7. What is the Timeline for Making These Repairs/Purchases?

8. Any Other Comments. (Add an additional page to this form if necessary.)

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Did the Pastor Refuse to Review Parsonage? _____

If “yes”, please explain: _____

SIGNATURES (Required)

Signature of Pastor: _____

Signature of District Superintendent: _____

Trustees Chair: _____