Notification of Audit Committee Members and Church Leaders

Church: ________________________________ Audit Year: ___________

Town: ________________________________

Church office E-mail: ______________________________ Phone: ______________

Audit Committee Members:

1. Name: ___________________________________  
   E-mail: ________________________________ Phone: ______________

2. Name: ___________________________________  
   E-mail: ________________________________ Phone: ______________

3. Name: ___________________________________  
   E-mail: ________________________________ Phone: ______________

Rector/Vicar/Priest-in-charge:

Name: ________________________________

E-mail: ________________________________ Phone: ______________

Senior Warden (optional):

Name: ________________________________
E-mail: ___________________________ Phone: ________________

Treasurer (optional):

Name: ___________________________

E-mail: ___________________________ Phone: ________________

Other:

Name: ___________________________ Position: ________________

E-mail: ___________________________ Phone: ________________

*only the email contacts listed on this page will be receive a response to the submitted audit*

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