



**LAITY CONTACT INFORMATION FOR 2026, SINGLE BOARD
(Simplified Accountable Structure)
2025 CC – Form 4**

Church _____ **District** _____

Note: Lay leadership/nominations report is required by each church for charge conference and is a separate supplemental form created by the church. Nominations Report shall include gender, racial/ethnic designation, and class for each person listed.

This form should be completed based on the nominations report. To be provided to the District Office or District Superintendent before or at charge conference.

Simplified Accountable Structure (Single Board Models) shall select and provide contact information for specific key leadership roles so the District and/or the Conference office may communicate information to the church. Provide all information, even if the person is continuing from previous year to ensure that district office has current information.

Minutes approving Single Board Model must be attached, if not previously provided to the District Office.

1. Church Council/Administrative Board Contact () Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____ Election Class: _____

2. Church Council/Recording Secretary Contact () Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____ Election Class: _____

3. Finance Contact () Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____ Election Class: _____

4. Financial Secretary Contact () Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____ Election Class: _____

5. (a) Lay Member of AC *(one per appointed pastor)*

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____ Election Class: _____

Lay Member of AC *(one per appointed pastor)*

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____ Election Class: _____

(b) Lay Member of Annual Conference – Alternate

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____ Election Class: _____

6. Staff/Pastor-Parish Relations Contact

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____ Election Class: _____

7. Treasurer Contact

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____ Election Class: _____

8. Trustees Contact

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____ Election Class: _____

CONTACTS FOR OTHER MINISTRIES

9. Health and Wellness Liaison

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____

10. Historian/Archivist

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____

11. Outreach/Missions Coordinator

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____

12. United Methodist Men

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____

13. United Women of Faith President

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____

14. Worship Ministries Coordinator

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____

15. Young Adult Ministries Coordinator (ages 19-35)

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____

16. Youth Leader or Ministries Coordinator (ages 13-18)

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____

17. Caring Ministries

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____

18. Camping

() Continuing () New

Name: _____ E-mail: _____

Address: _____

Phone: (work) _____ (cell) _____ (home) _____

Gender: _____ Race: _____

Other Information (used to keep conference database accurate):

Church Street Address: _____

Church Mailing Address: _____

Church Email: _____ Church Website: _____

Church Social Media (Facebook, Twitter, Instagram, YouTube etc.): _____

Worship Time(s) _____

Contact person for questions about information on this form:

Form Preparer: _____ Phone: _____

Email: _____

Please remember if person/contact information changes during year, notify district office.