

**ARUNACHAL BAPTIST CHURCH COUNCIL, ABCC
ASSOCIATIONS' ANNUAL REPORT FORM**

Session _____ **Assembly** _____

Venue _____ **Date** _____

01. Name of Association or Council _____

Location of Mission Centre _____

02. Name of President _____

03. Name of Executive/General Secretary _____

04. The date & Year of Establishment _____

05. The department Secretaries:- Mission _____

Youth _____

Women _____

Sunday school Supt. _____

06. Total No. of Churches _____

07. Total No. of fellowship _____

08. Accurate No. of baptized Members _____

09. Accurate No. of Non –baptize members _____

10. Proposed budget _____ Actual Receipt _____

11. No. of the school _____

Names of the School a) _____

b) _____

c) _____

d) _____

12. No. of Theological Institutions _____

13. No. of Mission field you operate _____

Names of the mission field a) _____

b) _____

c) _____

d) _____

e) _____

14. No. of Mission partners _____

Name of the mission partners a) _____

b) _____

c) _____

d) _____

15. How many projects your association has taken up _____

a). major projects _____ sponsor _____

b). minor projects _____ sponsor _____

16. What are the major threats your association is facing _____

17. Any comment / suggestion regarding ABCC ministry _____

Executive/General Secretary