## Annual Request for Renewal of Tenure for Paid/Unpaid Assistant:

Name of Assistant: Address: Assistant's Title:		Church:					
					In harmony with the provisions of paragraphs 161-1 reby made to renew the annual tenure of the above Painal adjournment of the next District Assembly unless the sions.	l/Unpaid Assistant.	The tenure shall continue until
				A.	How many years has this Paid/Unpaid Assistant served on the staff of this local Church? What was the date his/her tenure commenced?		
B.	Has the Official Church Board of your local church voted to retain this Paid/Unpaid Assistant for one more year? [ ]YES [ ]NO						
	1. How many persons serve on your church board?						
	2. How many were present to vote to renew the tenure?						
	3. Was the vote [ ]BY BALLOT, or [ ]BY SHOW OF HANDS, or [ ]VOICE VOTE?						
	4. What was the result of the vote to renew the tenure of this Paid/Unpaid Assistant?						
	YESNO [ ]MAJORITY by s	ow of hands or by vo	pice vote.				
C.	Does this Paid/Unpaid Assistant have your full recommendation as the pastor of the church for renewal of his/her tenure? [ ]YES [ ]NO						
D.	List the salary and benefits now being received by this Assistant.						
	<b>\$</b>		\$				
	<b>\$</b>		_ \$				
	<b> \$</b>		_ \$				
	\$						
E.	Will your local church be able to maintain the above remuneration for the coming year along with normal increases and still pay all assigned District and Denominational Budgets in full as provided in <i>Manual</i> , par. 161. [ ]YES [ ]NO						
	1. Did your local church pay all budgets last year?	[ ]YES [ ]NO					
	2. Will your local church pay all budgets this year?	[ ]YES [ ]NO					
SIGN							
	Pastor of the Local Church	Secretary of the Chu	rch Board				

Please Return This Form To:

DR. LARRY R. FAIRBANKS 272 JACK OAK ROAD ST. MARYS, OH 45885