



## ANNUAL CHURCH LIFE REPORT (ACLR) For the Year 2011

Church Name: _____	Church ID #: _____
Mailing Address: _____	
Phone: _____	Fax: _____
Email: _____	Web Page / URL: _____

Thank you for completing the **2011 Annual Church Life Report (ACLR)** for your assembly. Please ensure that you, or an appropriate staff member, complete the following questions as fully as possible. Once the form is complete, please review the data and return the complete set with your signature.

Please **PLACE A CHECK (✓)** next to all the applicable statements that are appropriate for your assembly. (The small italicized print is an explanation designed to assist you in answering the question). **All questions are answered**, as it relates to your local church, **for the 12 month period ending December 31, 2011**, except for financial data which will be provided for the fiscal period covered in the last annual financial reporting period of your assembly. Also, please be sure to fill in all the blanks as required.

### 1. ASSEMBLY SIZE

- \_\_\_\_\_ a. Number of persons considering this to be their primary assembly  
*(Includes members, adherents, shut-ins, occasional attendees, and others)*
- \_\_\_\_\_ b. Average attendance at the primary service(s) of the week  
*(The average number attending the main service of the week, whether or not that service is on Sunday morning)*
- \_\_\_\_\_ c. Total number of members  
*(Persons who hold membership with voting privileges within the assembly)*
- \_\_\_\_\_ d. Total number of ministry staff  
*(Persons who would attend a staff meeting)*
  - \_\_\_\_\_ Number of PAOC credentialed ministry staff included  
*(All full or part-time credentialed persons elected or appointed to the pastoral staff)*
- \_\_\_\_\_ e. Does your church have the Plan to Protect Policy in place? (yes or no)

### 2. CHURCH RECORDS

- \_\_\_\_\_ a. Total number of known persons who have confessed Christ as Saviour for the first time in 2011
- \_\_\_\_\_ b. Number of persons who have received the baptism of the Holy Spirit in 2011
- \_\_\_\_\_ c. Number of believers baptized in water in 2011
- \_\_\_\_\_ d. Number of infant or child dedications in 2011

### 3. FISCAL INFORMATION (for last annual financial reporting period)

**NOTE: Round off dollar amounts – do not use cents.**

- \_\_\_\_\_ a. Total income of all departments (including the General Fund)  
*(The gross amount of actual income for all assembly activities)*
- \_\_\_\_\_ b. Assembly contribution to the district office  
*(The amount of tithe or support forwarded to the district office)*
- \_\_\_\_\_ c. Assembly contribution to international missions  
*(ie. Through PAOC International Missions and/or other organizations/agencies)*
- \_\_\_\_\_ d. Assembly contribution to humanitarian relief programs and/or child sponsorship.  
*(ie. Through ERDO – Emergency Relief & Development Overseas and/or other relief organizations)*
- \_\_\_\_\_ e. Assembly contribution to national missions  
*(ie. Through PAOC Mission Canada and/or other organizations/agencies)*
- \_\_\_\_\_ f. Total approximate value of all property and buildings owned  
*(ie. Using the property tax assessment or informed opinion from a real estate agent)*
- \_\_\_\_\_ g. Total capital indebtedness

### 4. CONSTITUTIONS AND PROPERTY

#### **Local Church Constitution (LCC)**

- a. This assembly is governed by the LCC of PAOC.  
 Elected Board Model     Pastor's Council Model
- b. This assembly is governed by a constitution other than the LCC of PAOC.
- c. This assembly's constitution has been updated with the amendments approved at the 2010 General Conference of PAOC.

#### **District**

- d. This assembly is incorporated as a society under legislation provincially or federally.

#### **Property**

- e. The property of this assembly is held in the name of PAOC (International Office or District Office) in Trust for the local assembly.
- f. The property of this assembly is held directly in the incorporated name of the local assembly.
- g. The property of this assembly is held under the names of individual local trustees.

### 5. MISSIONAL MINISTRY

- a. This assembly has a mission board or committee.  
Primary Contact Name: \_\_\_\_\_ Contact Number/Email: \_\_\_\_\_

#### **A. MISSION CANADA**

- a. Do you support a missional ministry initiative in Canada?  
*(ie. Aboriginal, Newcomers to Canada, Next Generation, Quebec/Francophone Canada, Urban Centres, etc)*  
If yes, what and where? \_\_\_\_\_
- b. This assembly has sent out individual(s)/team(s) to missions in Canada in 2011.  
If yes, what type of team and where? \_\_\_\_\_
- c. Is your church involved in outreach to your community in any of the five present Mission Canada focuses?  
*(Aboriginal, Newcomers to Canada, Next Generation, Quebec/Francophone Canada, Urban Centres)*  
If yes, which focus and how? \_\_\_\_\_  
*(ie. Next Gen after school program, Urban soup kitchen, etc)*

**B. INTERNATIONAL MISSIONS**

- a. This assembly has a written mission plan/policy.
- b. This assembly has sent out short-term missions team(s) in 2011.
- c. This assembly has members looking to serve on the mission field – long term or for a short period of time.
- d. This assembly has a strategy in place to pray regularly for our partner missionaries.

**6. TECHNOLOGY & RESOURCES**

- a. This assembly uses Internet access for:
  - Communication  
*(ie. Email, website, etc)*
  - Sermon/presentation preparation
  - Commerce  
*(ie. Banking, purchasing, etc)*
- b. This assembly uses Internet access via:
  - Dial up connection
  - Hi-speed connection
- c. If this assembly purchases resources from suppliers other than Wordcom Christian Resources, please indicate what materials and suppliers are preferred: \_\_\_\_\_

**7. COMMENTS**

If you wish to share additional thoughts or comments, please feel free to email [info@paoc.org](mailto:info@paoc.org) at anytime.

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**This ACLR was completed by:** \_\_\_\_\_  
**Name (please print)**

**Contact information:** \_\_\_\_\_  
**(Phone & Email)**

***Thank you for taking time to fill out this year’s 2011 Annual Church Life Report.***

*I have reviewed the following material to the best of my ability, and am satisfied that it is appropriate and accurate.*

\_\_\_\_\_  
Senior Pastor’s Name *(please print)*

\_\_\_\_\_  
Senior Pastor’s Signature

***Please return your completed form to:***  
The Pentecostal Assemblies of Canada  
2450 Milltower Court  
Mississauga ON L5N 5Z6