

FORM FOR DISCONTINUING CHURCHES

_____ General Overseer

Name of Church _____

File Number _____ City _____ State _____

After investigation I advise that this church be discontinued. All members in good standing have been transferred to nearby Churches of God.

(Reason for discontinuing) _____

_____ State Overseer

Signature

_____ State

_____ Date

Return form to Dept. of Business and Records, P.O. Box 2430, Cleveland, TN 37320-2430