



Your complimentary use period has ended. Thank you for using PDF Complete.

Click Here to upgrade to Unlimited Pages and Expanded Features

SEVENTH-DAY ADVENTIST CHURCH CENTRAL ZAMBIA CONFERENCE

BAPTISM REPORT FORM

Number Baptized:

District Leader:

Baptizing Minister's Name:

District:

Date:

Date Reporting:

NOTE: SEND THIS REPORT TO CENTRAL ZAMBIA CONFERENCE MINISTERIAL OFFICE PROMPTLY AFTER EVERY BAPTISMAL EXERCISE.