



THE DIOCESE OF BRANDON

Instructions for Completing the Annual Return Forms

Completed forms are to be returned to the Synod Office:

The Diocese of Brandon
403 13th Street
Brandon MB R7A 4P9

For assistance in completing the forms, please contact the Synod Office at 204-727-7550, or e-mail Greig Scott at diobran@me.com. Additional copies are available to download on our diocesan website: <http://www.dioceseofbrandon.org>.

The Annual Return form must be completed and returned to the Synod Office by **February 28, 2017**. Your assistance and cooperation in meeting this deadline is appreciated.

1. Election/Appointment of Officers:

This part of the Annual Return asks for the name and contact information of the Wardens, Secretary, Treasurer, Lay Readers, Eucharistic Administrants, and other contacts appointed at your Annual Meeting.

2. Statistical Information:

This section is for your congregation's statistics. The "Total Confirmed Persons" is used to determine the number of Synod delegates to which your parish is entitled. Please ensure that this number is completed as accurately as possible.

3. Financial Information:

A. **Congregation Income** [Do *not* include the principal portions of matured GIC's or other investment as income]

1. For FAIR SHARE:

a) Envelope, open (cash) and special liturgical celebration offerings (Easter, Christmas, etc.). Any donation specified for regular operations costs (e.g. heat bill, stipend) is subject to Fair Share. ****Only specified (designated) capital repair or fixture donations are exempt and placed on line 4.**

b) Non-designated donations from parish associations: ACW, Men's Associations, etc.

c) Other: Fundraising (net) for general operating expenses (non-designated) is subject to fair share. Rental income for church properties is subject.

2 & 3 Lines 2&3 are self-explanatory.

4. Designated Donations for capital projects such as new roof, pews, heating system. This money can only be used for its designated purpose. ****This will not include donations for normal operations expenses such as furnace or plumbing repairs, broken windows, and miscellaneous maintenance items, etc.**

5. Special Appeals include such items as PWRDF, Mustard Seed, Camp Fund. This should equal the line 12 expenditure: you have forwarded the same amount to the recipient. **DO NOT** include special Easter and Christmas service collections, Harvest Festival, etc. They are to be reported as envelope or open income on section A, line.1.a).

B. Expenditures

Clergy Expense, Lines 6-8

6. **SINGLE-POINT PARISH:** Clergy salary, benefits/travel, housing and utility costs go on line 6.
7. **MULTI-POINT PARISH:** Your share of stipend and benefits you contribute to your parish council treasurer.
8. Rectory repair and other miscellaneous expenses would be placed in #8 and labeled as such in the blank space.

General Operating

9. **Capital Repairs** – Examples: re-shingling roof, building additions, new heating systems, structural repairs, insulation, new organ, renovations, etc.
10. **Loan Repayment** – Include principal and interest in this figure.
- 11-20. Self-explanatory.

SURPLUS/DEFICIT: The difference between totals A and B will be the surplus or deficit for the year. If it is a deficit, then place a bracket () around the resulting balance.

The last page of the Financial Information Return asks for information about the buildings that the Parish operates. Please complete this information as accurately as possible. It is especially important to have the replacement value and the insured value completed.

Please do not forget to indicate the amount of General Liability Insurance Coverage that the congregation has through a general insurance policy. For congregations participating in the Diocesan Insurance plan, the liability coverage is \$5,000,000.

4. SYNOD DELEGATES (Triennially)

The final page is for recording your parish lay delegates and alternates *in a Synod year*. The next Synod will be held in 2017. This page will not be included in the Statistics package in a non-Synod year.

Diocese of Brandon
Notice of Election/Appointment of Officers for 2017

Congregation/Parish: _____

City/Town: _____

Incumbent: _____

Please complete and return this form to the Synod Office by February 28, 2017.

Incumbent's Warden:

Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

People's Warden:

Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

Treasurer:

Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home) _____

Fax (if available): _____ E-Mail: _____

Secretary:

Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

Parish Council Chairperson (if applicable):

Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

Parish Council Treasurer (if applicable):

Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

SUNDAY SCHOOL SUPERINTENDENT:

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

CAMP REPRESENTATIVE:

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

PWRDF CONTACT :

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

PARTNERS IN MISSION CONTACT:

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

ACW PRESIDENT:

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

MUSTARD SEED REP:

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

ANGLICAN FELLOWSHIP OF PRAYER PARISH REP:

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

STEWARDSHIP OFFICER:

Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____

LAY READERS:

1. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
2. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
3. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
4. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
5. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

EUCCHARISTIC ADMINISTRANTS:

1. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
2. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
3. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____
4. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

**Diocese of Brandon
Annual Return – 2016 – Statistical Information**

Congregation/Parish: _____

City/Town: _____

Incumbent: _____

A. CONGREGATION STATISTICS

1. Total Members on Parish Roll (adults & children) _____

2. Total ACTIVE Members on Parish Roll (those who attend services or contribute,
or are identified with ACW, Sunday School, etc.) _____

3. Total Identifiable Givers
(as identified by the number of Charitable Donation Receipts issued during 2016) _____

Regular Givers: _____ One-Time Givers: _____

4. Confirmed persons on Parish Rolls _____

5. Average weekly attendance at Sunday Services _____

6. Total yearly Sunday attendance _____

7. Total Attendance for the year, including all Services of every kind _____

8. Average number of weekly communicants _____

9. Attendance for: Christmas Eve + Christmas Day (total) _____

Easter Day, including the Easter Vigil _____

Pentecost _____

2nd Sunday in September _____

Please complete and return this form to the Synod Office by February 28, 2017.

B. PARISH RECORDS

- 1. Baptisms (Children _____ / Adults _____) _____
- 2. Confirmations (Children _____ / Adults _____) _____
- 3. Received from other Communions _____
- 4. Marriages _____
- 5. Funerals _____

C. ORGANIZATIONS AND GROUPS (Please record number of participants, not number of groups)

- 1. Anglican Church Women _____
- 2. Other Women's Groups _____
- 3. Men's Groups _____
- 4. Other Adult Groups _____
- 5. Youth Groups _____
- 6. Church Sponsored* Youth Groups (Cubs, Scouts, etc.) _____
- 7. Church Sponsored* Adult Groups (A.A., etc.) _____

*Note: "Church-Sponsored" means the group does NOT pay for the use of the church hall or meeting room.

D. CHURCH SCHOOLS

- 1. Number of Schools _____
- 2. Number of Teachers _____
- 3. Number of Pupils _____
- 4. Average Sunday Attendance _____

Diocese of Brandon Annual Return – 2016 – Financial Information

Congregation/Parish: _____

City/Town: _____

Incumbent: _____

Please complete and return this form to the Synod Office by February 28, 2017.

A. CONGREGATION INCOME (Note: Do *not* include matured investments)

1. For FAIR SHARE:

- a) Envelope, open offering & undesignated _____
- b) Donations from organizations (ACW, etc.) _____
- c) Other (undesignated fundraising, rentals, etc.) _____

SUBTOTAL _____

- 2. Interest on Parish Investments, Endowments, GST rebates _____
- 3. Diocesan Grant _____
- 4. Designated Donations _____
- 5. Special Appeals (PWRDF, Samaritan House, etc.) _____

(A) TOTAL INCOME _____

B. EXPENDITURES

Clergy Expense:

- 6. Salaries, benefits, travel, housing & utilities _____
- 7. Multi-Point parish contribution to Parish Council _____
- 8. Other _____

SUBTOTAL _____

General Operating:

- 9. Capital Repairs (major construction to building) _____
- 10. Loan Repayment (including interest) _____
- 11. Fair Share _____
- 12. Special Appeals (PWRDF, Samaritan House, etc.) _____
- 13. Gifts/honoraria _____
- 14. Fire and liability insurance _____
- 15. Property taxes _____
- 16. Utilities _____
- 17. Supplies _____
- 18. Repairs (general maintenance) _____
- 19. Secretarial/Caretaker _____
- 20. Miscellaneous _____
- 21. Other (specify) _____

(B) TOTAL EXPENSES _____

SURPLUS/DEFICIT (A MINUS B) _____

C. FINANCIAL ASSETS/LIABILITIES: Please list all bank balances and Financial assets as of Dec. 31. Include accounts receivable and amounts invested in the Diocesan Investment account

Chequing	_____	_____
Savings	_____	_____
GIC etc., Capital Available	_____	_____
GIC etc., Capital Restricted	_____	_____
GST Rebate Receivable	_____	_____
Other Accounts Receivable	_____	_____
Other Assets	_____	_____
	TOTAL	_____

Please list all loans (including loans from the Diocese) and other liabilities (e.g. accounts payable) and indicate purpose (capital or operating) with balance owing as of December 31:

_____	(Capital/Operating)	_____
_____	(Capital/Operating)	_____
_____	(Capital/Operating)	_____
_____	(Capital/Operating)	_____
	TOTAL	_____

D. BUILDING INSURANCE

	Estimated Replacement Value	Insured Value	Outstanding Indebtedness
1. Building #1 (e.g. Church)	_____	_____	_____
2. Building #2 (e.g. Hall)	_____	_____	_____
3. Building #3 (e.g. Rectory)	_____	_____	_____
4. Furniture & Fixtures (contents)	_____	_____	_____

GENERAL LIABILITY INSURANCE COVERAGE IS WITH
(AON Diocesan Policy or Parish Policy)

PROPERTY (FIRE) INSURANCE COVERAGE IS WITH

LAST CHARITY RETURN WAS FILED BY

For year ended mm/dd/yyyy

Parish Charity number is

Diocese of Brandon Notice of Election of Lay Delegates for 2017

Congregation/Parish: _____

City/Town: _____

Incumbent: _____

Please complete and return this form to the Synod Office by February 28, 2017.

I hereby certify that at the duly convened Annual/Special meeting of the Communicants of this Parish held on _____, 2017, the following persons, duly qualified, were elected Lay Delegates and Alternates, as noted, to the Synod of the Diocese of Brandon.

All synod delegate and alternate positions must be filled by persons who are at least 18 years of age, confirmed, and regular communicants in the Parish.

(Signed) _____ **Presiding Officer at Election**

DELEGATES:

1. Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

2. Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

3. Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

4. Name: _____

Mailing Address: _____

Telephone (Office): _____ (Home): _____

Fax (if available): _____ E-Mail: _____

Please see over for Alternates.

ALTERNATES:

- 1. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

- 2. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

- 3. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

- 4. Name: _____
Mailing Address: _____
Telephone (Office): _____ (Home): _____
Fax (if available): _____ E-Mail: _____

Note that the number of Lay Delegates permitted is governed by the "Confirmed Persons (aged 18 and over) on the Congregation Roll" as recorded on the Statistical Information form and according to the following table:

Confirmed Persons	Lay Delegates
6 to 50	1
51 to 101	2
102 to 201	3
202 to 301	4