

# **Diocese of Chichester APCM Submission** - **Results of Meeting**

All fields are required. Please enter N/A if nobody has been elected to a given post this year.

The following people have been elected to the PCC of **Please enter the parish name** 

Name of Clergy

Churchwarden 1

Please note that Churchwarden 1 is usually the most senior churchwarden appointed (not always). The person that is nominated to fill this role will be the person who will receive paper communications from the Diocese. Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS

Churchwarden 2 Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS

## Churchwarden 3

Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS \*\* You will only have more than two churchwardens if you have more than one parish church. If you have more than four churchwardens, please email <u>databaseadministrator@chichester.anglican.org</u>

## Churchwarden 4

Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS \*\* You will only have more than two churchwardens if you have more than one parish church. If you have more than four churchwardens, please email databaseadministrator@chichester.anglican.org



#### Secretary

Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS

#### Treasurer

Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS

## Safeguarding Officer

Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS \*\* This person does not have to be elected to the PCC\*\*

## Electoral Roll Officer

Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS \*\*This person does not have to be elected to the PCC\*\*

## Deanery Synod House of Laity Representative 1

Your PCC Secretary has been notified how many representatives you should elect. Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS \*\* Deanery Synod Representatives are automatically PCC members as well\*\*

#### Deanery Synod House of Laity Representative 2

Your PCC Secretary has been notified how many representatives you should elect. Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS \*\* Deanery Synod Representatives are automatically PCC members as well\*\*



#### Deanery Synod House of Laity Representative 3

Your PCC Secretary has been notified how many representatives you should elect. Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS \*\* Deanery Synod Representatives are automatically PCC members as well\*\*

### Deanery Synod House of Laity Representative 4

Your PCC Secretary has been notified how many representatives you should elect. Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS \*\* Deanery Synod Representatives are automatically PCC members as well\*\*

### Deanery Synod House of Laity Representative 5

Your PCC Secretary has been notified how many representatives you should elect. Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS \*\* Deanery Synod Representatives are automatically PCC members as well\*\*

## Deanery Synod House of Laity Representative 6

Your PCC Secretary has been notified how many representatives you should elect. Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS \*\* Deanery Synod Representatives are automatically PCC members as well\*\*

## Deanery Synod House of Laity Representative 7

Your PCC Secretary has been notified how many representatives you should elect. Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS \*\* Deanery Synod Representatives are automatically PCC members as well\*\*

## Deanery Synod House of Laity Representative 8

Your PCC Secretary has been notified how many representatives you should elect. Please provide NAME, FULL ADDRESS, TELEPHONE & EMAIL ADDRESS \*\* Deanery Synod Representatives are automatically PCC members as well\*\*



Declaration : I Confirm that our APCM was held on

Name of the person completing this return Signed \*

Please enter your full name in capitals

Position held