A close up of a sign

Description automatically generated

*Title I, Canon 6, Section 2, requires all non-parochial clergy to report to the Bishop annually on the exercise of their office.*

NAME \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

PRIEST ( ) DEACON ( )

ADDRESS \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

CITY\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ STATE \_\_\_\_\_\_\_ ZIP \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

TELEPHONE \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ E-MAIL \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Summary of Ministry for Year: \_\_\_\_\_\_\_\_\_**

\_\_\_\_\_Celebration of Holy Communion \_\_\_\_\_Assisting at Holy Communion \_\_\_\_\_Morning and Evening Prayers Services \_\_\_\_\_Baptisms

\_\_\_\_\_Number of Sermons

\_\_\_\_\_Pastoral Counseling Sessions \_\_\_\_\_Lectures/Seminars

\_\_\_\_\_Hospital Visits

\_\_\_\_\_Pastoral Visits  
\_\_\_\_\_Church Meetings

\_\_\_\_\_Presented for Confirmation  
\_\_\_\_\_Marriages  
\_\_\_\_\_Burial

\_\_\_\_\_Other Services (explain)

Please write a brief summary of your life and ministry during the past year:

Please complete this form and return it by March 1 to:  
The Rt. Rev. Sean W. Rowe at 145 W. 6th St., Erie, PA 16501 or vbutler@episcopalpartnership.org.