Maple Springs Baptist Church

4131 Belt Road Capitol Heights, MD 20743

RECOMMENDED SLATE OF OFFICERS FORM

YEAR: NAME OF MINISTRY:				
	ls are submitted to hold the office indicated		es.	
POSITION	NAME	***TO BE C	***TO BE COMPLETED BY FINANCE OFFICE*** (Good and Regular Standing)	
President		120		
Vice President				
Secretary				
Assistant Secretary				
Treasurer				
Chaplain				
*****	**********	******	******	
SIGNATURE OF PRESIDENT:		DATE:		
SIGNATURE OF SECRETARY:		DATE:	DATE:	
••••••••••••••••••••••••••••••••••••••	OMPLETED BY OFFICIAL B	OARD ONLY	*****	
OFFICIAL BOARD APPROVAL:				
APPROVED BY:	DISAPPROVED E	3Y:		
SIGNATURE:		DATE:		
NOTIFICATION TO MINISTRY O	N:(Copy Placed in Ministry Leader Mailbo	 DX)		