

Episcopal Diocese of Montana
Deacon's Annual Report, 2017

***DEACON'S ANNUAL ACTIVITY REPORT TO THE BISHOP AND
ARCHDEACON (DUE DATE: ST. STEPHEN'S DAY, 12/26)***

- 1) # OF TIMES ASSISTED WITH WORSHIP _____

- 2) # OF SERMONS DELIVERED _____

- 3) # OF HOSPITAL AND SHUT-IN COMMUNIONS _____

- 4) # OF HOSPITAL AND SHUT-IN COMMUNIONS DONE BY EUCHARISTIC VISITORS _____

- 5) # OF TIMES PARTICIPATED IN OTHER PUBLIC WORSHIP EVENTS--
NAME THOSE EVENTS (I.E., COMMUNITY THANKSGIVING SERVICE,
MARTIN LUTHER KING DAY, COMMUNITY GOOD FRIDAY SERVICE,
HOLOCAUST REMEMBRANCE SERVICE)

- 6) PROVIDE THE NAMES OF COMMUNITY ORGANIZATIONS IN WHICH
YOU SERVE AND IN WHAT CAPACITY

- 7) PROVIDE THE NAMES OF COMMUNITY ORGANIZATIONS WITH
WHICH YOU HAVE HAD ANY CONTACT IN SERVICE TO OTHERS

- 8) LIST CONGREGATIONAL EVENTS AT WHICH YOU MADE A
PRESENTATION OR NAME CLASSES YOU FACILITATED