**2016 Local Membership Census Form**

**Local Unit Name: Unit President:**

**District Name: Elizabeth River District Address:**

**Conference Name: Virginia Conference City:**

**Reported by: State / Zip:**

**Phone: Phone:**

**Email: Email:**

Number of Members as of January 1, 2016

New Members added

Numbers Lost by Death or

**Total Members December 31, 2016**

**Unit Type**

Are you a: Local, Cluster/Charge, District or Online Unit:  **Local.\_**

|  |  |
| --- | --- |
| **Instructions:**Fill in your information and insert your numbers into shaded area.  | ***Send copies by January 30, 2017 to:***District Coordinator of Membership Nurture and OutreachJanet L. Day216 Cypress RoadPortsmouth, VA 23701-1436jday216@cox.net  |