

B.E.S.T. MISSIONS LITERATURE REQUEST FORM

CHURCH NAME:

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HOW LONG HAS THE CHURCH BEEN IN EXISTENCE:

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PASTOR'S NAME:

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HOW LONG HAS THE PASTOR BEEN AT THE CHURCH:

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YOUR NAME:

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EMAIL ADDRESS:

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CHURCH ADDRESS:

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SHIPPING ADDRESS IF DIFFERENT:

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TYPE OF LITERATURE NEEDED:

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NUMBER OF PEOPLE ATTENDING CHURCH SERVICES ON AVERAGE:

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NUMBER OF PEOPLE SAVED SINCE LAST TIME YOU REQUESTED LITERATURE:

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NUMBER OF PEOPLE BAPTIZED SINCE LAST TIME YOU REQUESTED LITERATURE:

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ARE YOU USING A DISCIPLESHIP PROGRAM FOR YOUR CHURCH?

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IF YOU ARE USING A DISCIPLESHIP PROGRAM, HOW MANY ARE IN THE PROGRAM ON AVERAGE:

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DO NOT FILL OUT BELOW - FOR THE OFFICE

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DATE RECEIVED:

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DATE FULFILLED:

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REASON FOR NOT FULFILLING:

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