

**Presbytery of Eastern Virginia
International Congo Partnership Committee (IPC)
Sister Church Pairing Sub-Committee
Report Form**

Name of person making contact: _____

Date of contact: _____

Name of person contacted: _____

Church: _____

Position: _____

Any changes in contact information:

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1. Updates on congregational activities (already accomplished or being planned) relating to Congo Partnership or Sister Church Relationship:

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2. Specific requests for involvement of the Mission Facilitator:

3. Suggestions or questions for IPC consideration:

4. Problems or concerns with the IPC or the sister church relationship:

5. Financial support of the IPC &/or sister church project:
