



The Presbytery of Carlisle

2601 N. Front Street, Ste. 107, Harrisburg, PA 17110

Phone: 717-737-6821 | Fax: 717-730-9137 | Web: www.carlislepby.org

Church Indebtedness Report Form

Deadline: February 4th, 2022

Note: Every Church must file a report even if the church has no indebtedness.

Church _____

Person Reporting _____

Does your church have indebtedness? Yes No

Please list mortgages, loans and credit lines below.

LOANS/MORTGAGE

| Name of Lender | Date of Loan | Balance as of Dec. 31 st , 2020 | Balance as of Dec. 31 st , 2021 |
|----------------|--------------|--|--|
| | | | |
| | | | |

LINES OF CREDIT/CREDIT CARDS

| Name of Lender | Credit Limit | Balance as of Dec. 31 st , 2020 | Balance as of Dec. 31 st , 2021 |
|----------------|--------------|--|--|
| | | | |
| | | | |
| | | | |

If the church is in arrears on any payments, please indicate the amount. \$ _____

Please return this completed form to treasurer@carlislepby.org by February 4, 2022.

Note: Please be sure to complete the Church Insurance Coverage Report Form on the reverse.

Church Insurance Coverage Report Form

Deadline: February 4th, 2022

Note: Please provide the information requested even if nothing has changed since last year.

Name of Church _____

Insurance Carrier _____

Agent's Name _____

Agent's address _____

Agent's phone and/or e-mail address _____

Do you have an appraisal of the church property? Yes No

By whom _____ Date of most recent appraisal _____

Total Value \$ _____

Real Property \$ _____

Furnishings..... \$ _____

Is this appraisal updated? Yes No

If yes, how frequently? _____

Is this appraisal for replacement value? Yes No

Note: A church's insurance **must** include liability coverage for sexual misconduct. Without this coverage, the church will not be considered insured.

We recommend the following minimum coverage for each congregation:

Property

| | |
|------------------|--------------------------------|
| Special Form | Agreed Amount (no coinsurance) |
| Replacement Cost | \$500 Deductible |

Crime

Employee dishonesty and forgery - \$10,000 limit Money and Securities - \$1,000 on and off premises

General Liability

- \$1,000,000 occurrence with a \$3,000,000 aggregate
- \$5,000 premises medical payments
- \$250,000 occurrence with \$500,000 aggregate for sexual misconduct
- \$1,000,000 hired and non-owned auto liability
- \$1,000,000 directors and officers liability
- \$1,000,000 umbrella or excess liability

Note: Please complete the **Indebtedness Information** on the reverse side of this form.