



**Presbytery of the Cascades**

503-227-5486

245 S Bancroft, Suite D

Portland, OR 97239

## REPORT OF REVIEW OF SESSION RECORDS

Minutes of (name of congregation): \_\_\_\_\_

Congregation City: \_\_\_\_\_

Review of Minutes for period from: \_\_\_\_\_ to: \_\_\_\_\_

Annual Financial Review Verification noted: No \_\_\_\_ Yes \_\_\_\_ If yes, date Session Accepted Financial Review \_\_\_\_\_

### HELPFUL TIPS OR COMMENTS FOR THE CLERK ON ANY DEPARTURES FROM MINUTES STANDARDS

| Minutes | Date | Page | Comment |
|---------|------|------|---------|
|         |      |      |         |

A verification label, signed by the Stated Clerk, will be mailed to the church. The Stated Clerk will provide a copy of this report to the Church Clerk (together with verification label to be placed in Minutes book)

### Reader

Name:

Reader's Church Name/City:

Date of Reading:

Return this form via email to: [office@potc.org](mailto:office@potc.org)