

PRESBYTERIAN WOMEN – PRESBYTERY OF THE JAMES  
**COORDINATING TEAM - PRESBYTERIAN WOMEN IN THE  
CONGREGATION**

For Program Year Beginning (Date) 6-2026 THROUGH (Date) 5-31-27

*This form is used to provide contact information for the members of your congregation's Coordinating Team for publication in the PW-POJ Directory. This form also may be used to submit changes to the Secretary that occur during the program year.*

NAME OF CHURCH \_\_\_\_\_ CHURCH TELEPHONE \_\_\_\_\_

CHURCH ADDRESS \_\_\_\_\_

CHURCH **E-MAIL** ADDRESS \_\_\_\_\_

WEBSITE ADDRESS \_\_\_\_\_ NAME OF CHURCH'S PASTOR \_\_\_\_\_

LIST NAMES AND CONTACT INFORMATION OF ELECTED LEADERS INDICATED

**MODERATOR**

NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ E-MAIL \_\_\_\_\_  
\_\_\_\_\_

**VICE MODERATOR**

NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ E-MAIL \_\_\_\_\_  
\_\_\_\_\_

**SECRETARY**

NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ E-MAIL \_\_\_\_\_  
\_\_\_\_\_

**TREASURER**

NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ E-MAIL \_\_\_\_\_  
\_\_\_\_\_

**HISTORIAN**

NAME \_\_\_\_\_ TELEPHONE \_\_\_\_\_  
ADDRESS \_\_\_\_\_ E-MAIL \_\_\_\_\_  
\_\_\_\_\_

**Keep a copy of your report, and submit copies by June 1, 2026, to your AREA LEADER and to:**

**Kathy Peebles, 12201 Percival Street, Chester, VA 23831.**

**Report Submitted By** \_\_\_\_\_ (Signature)      **Date** \_\_\_\_\_