



# International Department of Music

*Church of Our Lord Jesus Christ of the Apostolic Faith, Inc.*

**Bishop Thurman L. Hargrove**  
IDM Overseer

**Sister Nancy Y. Rowe**  
IDM President

**Sister Linda B. Lacy**  
IDM Vice President

## Assessment Form

**Representation Amount \$30.00**

**Total Amount Enclosed**

\$ \_\_\_\_\_

**Make payment payable to:**

International Department of Music-COOLJC  
P.O. Box 42384  
Detroit, MI 48242-0384

### Church Name & Local Pastor

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*City/State/Zip Code*

\_\_\_\_\_  
*Phone Number*

### Choir President

\_\_\_\_\_  
*Name*

\_\_\_\_\_  
*Address*

\_\_\_\_\_  
*City/State/Zip Code*

\_\_\_\_\_  
*Phone Number*

### Spiritual Report

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