

AMERICAN BAPTIST CHURCHES OF THE SOUTH



ABWOTS Silver+ Recognition

CRITERIA: Nominees must have been involved in church ministries, ABCOTS, and or has supported ABCOTS or ABWOTS ministry objectives for 25 or more years.

I hereby nominate the following woman to be recognized as an "ABWOTS Silver+ Recognition" Honoree:

NAME OF NOMINEE

TITLE	Print FIRST NAME	Print LAST NAME
ADDRESS	E-MAIL ADDRESS	TELEPHONE NUMBER
CITY	STATE	ZIP CODE

CHURCH INFORMATION

CHURCH NAME/ORGANIZATION TITLE	ABCOTS AREA	
CITY	STATE	ZIP CODE
PASTOR	EMAIL ADDRESS	TELEPHONE NUMBER

NOMINEE'S CHURCH INVOLVEMENT (Be specific)

NOMINEE'S ABCOTS or ABWOTS INVOLVEMENT (Be specific)

I certify that the information provided in this form is correct to the best of my knowledge and is made in good faith. I also certify that this nomination meets the eligibility criteria.

Nominator's Name: _____ Home or Cell Number: _____
Please Print

Pastor's Signature: _____ Date: _____

NOMINATION DEADLINE: March 22, 2025

E-MAIL TO: ABWOTS President: Mrs. Cynthia C. Bentley ccolemanbentley@yahoo.com
Telephone Number: (301)868-5429 (Home) (301)448-5615 (Cell)

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