

RECORD OF DISFELLOWSHIPING OR DISASSOCIATION

Name _____
(Please use typewriter if possible)

Congregation _____
(Name) (City) (State)

Date disfellowshipped
or disassociated _____ Cong.
Number _____

Offense(s) for which disfellowshipped (if disassociated give reason):

NOTE: The S-77 form should be sent to Society along with the S-79a and S-79b cards. The S-79b card will be stamped showing date received and will be returned to the congregation. If person is reinstated (or dies) return S-79b card to Society with date and signature of secretary. (It should not be signed when initially sent to the Society.)

Date reinstated _____
(Secretary)