

# NOTIFICATION OF DISFELLOWSHIPING OR DISASSOCIATION

(Please type or print neatly in ink.)

Individual's full name:

Last

First

Middle

(Jr, Sr, II, III, etc.)

Date of birth

Date of announcement of  
disfellowshipping or disassociation

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Congregation number

Congregation name

City

State

Check if applicable:  Elder  Ministerial servant  Regular pioneer (If so, include S-202 with this form.)  Special pioneer  
 Listed with the branch office as the person to receive literature and/or magazine shipments for the congregation. (If so, immediately submit an S-36 and/or M-206 form, showing a new name and address.)

1.  **DISFELLOWSHIPING.** Specify offense(s) for which disfellowshipped (See *ks91-92-6*):

At any point, did the wrongdoer confess to the committee? If not, what evidence substantiated the wrongdoing?

**DISASSOCIATION.** Specify by what action(s) the person disassociated himself (such as resignation, non-neutral activity, failure to abstain from blood, or joining another religion):

Did the individual submit a *signed* letter of resignation? If not, what evidence substantiated the disassociation?

2. Give a detailed summation of the case, explaining exactly what took place. (Use additional sheet *only* if more space is needed.) For a disfellowshipping, include the reasons why you judged the person to be unrepentant. For a disassociation, include what led to the person's decision, how he responded to efforts to assist him, and what convinced you that his position was adamant.

3. Did the individual appeal your decision? (If so, follow the instructions on the reverse side regarding appeals.)

4. If individual was previously disfellowshipped or disassociated show:

Date of previous action

Person's full name at that time

Date of previous reinstatement

Congregation that took the action

Name of congregation

City

State

5. Each member of the appointed committee should sign this form and any additional sheets. (Type name below each signature.)

CHAIRMAN:

Reinstated

Deceased Date:

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