



REV. DR .C. PAUL McBRIDE, PASTOR
Vision”

“The Church With a

FBC Incident Report Form

Incident Number: 01

Date of Incident: _____

Church Leader(s) and/or Person(s) Reporting Incident or Who Are Aware of Incident:

- 1) _____
- 2) _____
- 3) _____

Person(s) / Area of Ministry Involved:

- 1) _____
- 2) _____
- 3) _____

Description of Incident (What Has Happened Recently?):



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Steps Taken by Church Leadership and/or Ministry Leaders Upon Receipt of Information:

What Steps Are Being Taken by Church Leadership and/or Ministry Leaders In Order To Prevent Future Such Incidents:



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What Professional and/or Legal Organizations have been contacted? Please list the Name, Title, and Phone Number of the representative(s) to whom you have discussed this matter:

Organization #1: _____

Name: _____

Title: _____

Phone Number: _____

Organization #2: _____

Name: _____

Title: _____

Phone Number: _____

Organization #3: _____

Name: _____

Title: _____

Phone Number: _____

This report was submitted by (Signature): _____

Please Print Name here: _____

This day, the _____ of _____, _____