

BENEVOLENCE REQUEST FORM

Person(s) in need: _____ Date: _____

Address: _____

Phone: (H) _____ (W) _____

Amount requested: _____ For what purpose?: _____

Status of applicant (i.e. single parent, unemployed): _____

Specific details pertaining to how and why this need developed: _____

What other resources are available to this person(s)?: _____

Have they been faithfully tithing the past six months?: _____

Do they have a budget they are faithfully using?: _____

Have they received benevolence previously?: _____ How much?: _____

BENEVOLENCE APPROVAL

Approved amount: _____

Check to be made out to: _____

Signature of Deacon, or designee: _____

Signature of Elder: _____