>\$100 up to \$500

>\$500

Approval Date: 2/3/2018 Supercedes:8/21/2017

This form must be co	•		•		om the be	enevolence	fund at E	Emmaus Bib	ole
Church. This form will be retained for the church's financial records.  Who are funds being requested for?						Data	Date		1
willo are fullus beilig	requested ic	иг				<b>–</b> Date		/ MM/DD,	/ /YYYY
Street Address					City				
State		Zip			Phone	( )			
Membership Status (check box)			☐ Active N	Member or A		□ Non-At	tender		
Is requestor related to elders or deacc			☐ Yes ☐ No If yes, wh						
Brief Description of a		03		, es,	· <u> </u>				
bher bescription of a	33i3tarree ree	juesteu							
Amount Requested:	\$		_						
Specific details pertai	ning to how	and why ne	eed develope	ed:					
				-					
What other resource	s are availab	e to this pe	erson?						
Have they been faith				☐ Yes ☐ No					
Do they have a budge Have they received b	-	-	_	☐ Yes ☐ No		Amount:	ċ		
nave they received b	enevolence <sub>i</sub>	# of reque		□ 163 □ IV	,	Amount.	\$		
Deguest Approved									
Request Approved: Make Check Out To:	☐ Yes ☐ No				Date Appr	oved.		/	/
Wake check out 10.				-	bate Appi	ovcu.		MM/DD,	/ /YYYY
Up to \$100		☐ 1st Requ	iest	☐ Additional	Request				
Approval Signature	Deacon 1:					Deacon 3:			
	Deacon 2:								
>\$100 up to \$500		☐ 1st Requ	iest	☐ Additional	Request				
Approval Signature	Deacon 1:					Deacon 3:			
	Deacon 2: Elder:					Deacon 4:			
More than \$500									
Approval Signature	Elder 1:					Elder 2:			
Amount		Re	quest Approval Re		roval Regi	uired		Follow U	 p Time
Up to \$100			Request	, , , , pp	1 deacon			Within 3	•
Up to \$100		•	al Requests		2 deacons			Within 5	•
>\$100 up to \$500		1st F	Request		2 deacons	5	Within 5 days		

**Additional Requests** 

1st Request

3 deacons

2 Elders

Within 5 days

Within 7 days

<sup>\*</sup>Follow up time indicates the time in which the applicant will be contacted following form submission, not necessarily approval or denial of funds.