

Funding Assistance Application

Request for Outreach Funding Lutheran Church–Canada

Congregation: _____ Pastor: _____

Location: _____ Charitable Number: _____

ANTICIPATED RECEIPTS

Actual Pledges	\$
Additional Received Offerings	\$
Loose Offerings	\$
Other (describe):	\$
Total Anticipated Income	\$

UNPAID ACCOUNTS

Please list all unpaid accounts and indicate what action the congregation is taking to meet them:

PROGRAM FUNDING NEED SUMMARY

2019 Total Proposed Budget (Expenses)	\$
2019 Total Anticipate Receipts (Income)	\$
Anticipated Shortfall	\$

Please send your application, a copy of your most recent financial statements, and a copy of your 2019 budget, to the **Attention** of the **Regional Mission and Ministry Council**

Lutheran Church-Canada
3074 Portage Avenue
Winnipeg, MB R3K 0Y2
or via email to - accounting@lutheranchurch.ca

