

MERIDIAN STREET UNITED METHODIST CHURCH
5500 North Meridian Street
Indianapolis, IN 46208-2698
317-253-3237

Charitable Funding Request Form
(attach additional pages if necessary)

A. Requesting entity:

1. Name of project:

2. Address:

3. Phone and FAX:

4. Contact Person:

5. Officers of Organization:

B. Describe the overall mission of the requesting entity:

C. Describe the purpose of the project for which funding is requested and the specific use for the funds requested from MSUMC:

What is the time-frame in which the objective will be attained?

D. What are the total funds required for this project?

1. When are the funds needed?

2. What is the total amount of funds requested from MSMUC?

3. When did you last receive funds from MSUMC?

4. If you received funds before, within the past three years, from which group or committee at MSUMC?

5. What other entities have you approached, or do you plan to approach, for funding?

6. Who else has committed funds for this project?

7. Does your organization fund this project and in what amount?

8. Please attach a copy of the budget for this project.

E. 1. Does MSUMC presently provide volunteers to this project or program?

2. Is there a need for MSUMC volunteers, if so, in what capacity?

F. Do you expect further requests from MSUMC? When _____, Amount \$ _____,

Purpose _____

G. Will you place MSUMC on your mailing list for newsletters and annual reports? _____

H. Please provide the annual reports from the requesting entity/program sponsor for the past two years and your federal income tax exemption information.

I. Please attach your federal income tax exemption certificate.

Date: _____

Signature and Title of Officer of Requesting Entity

CHECK LIST

Budget _____

Annual Report _____

Tax Exemption Certificate _____

FOR OFFICE USE ONLY

ROUTE: Permanent Endowment _____ Hansman _____ Church & Society _____ Missions _____ Other _____