



Maritime Conference Bequest Funds Application



A. IDENTIFICATION

Pastoral Charge/Mission Unit/ Project: _____

Presbytery: _____

Complete Mailing Address: _____

Postal Code: _____

Revenue Canada Registered Charity Number: _____

Contact Person: _____

Address: _____

Postal Code: _____

Phone: (_____) _____ Fax: (_____) _____

Email: _____

Important: Please indicate person (Treasurer) to whom cheque is sent:

Name: _____

Address: _____

Postal Code: _____ Phone (_____) _____

Email: _____

B. HISTORY and DESCRIPTION OF MINISTRY OR PROJECT

1. Describe project, and the needs and constituencies to be served. Use separate sheet if necessary.

2. For how long has this project been active? _____

3. Amount of grant requested is \$.

4. What would be the EFFECT ON MINISTRY if the request is Not Granted _____

5. What sources of funding do you have and/or are you applying for this project?

<u>Source</u>	<u>Amount</u>	<u>Confirmed</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____

C. ASSETS AND LIABILITIES AS FOR THE LAST FISCAL YEAR (If applicable)

Cash and Bank Balances	\$	Capital Debt - Building - Other	\$ \$
Investments	\$		
Trusts, Endowments	\$	Operating Deficit	\$
Value of All Property	\$		
Total	\$	Total	\$
List Trusts, Endowments and Terms			

Please Note: A financial statement for the preceding year is to accompany this application, if one is available.

D. (1.) BUDGET AND PROJECTIONS *(Use another format if the project has a separate budget)*

BUDGET & PROJECTIONS	Actual Previous Year 2008	Budget Current Year 2009	Estimate Year of Request 2009
INCOME			
Opening Balance			
Fund Raising			
Interest Income			
Rental Income			
Income from:			
- Presbytery			
- Special Appeal			
- Other (specify)			
Bequest Grant Requested			
TOTAL INCOME			
EXPENDITURES			
Salaries:			
- Ministry Personnel			
- Other (Specify)			
Travel			
Housing Allowance			
Manse Expenses			
Book Allowance			
Continuing Education			
CPP, EI, WCB, etc.			
Church Pension			
Group Insurance			
Office Expenses			
Utilities			
Repairs/Maintenance			
Mortgage/Loan Payments			
Insurance			
Pres/Conf. Assessments			
Transfers			
Other (specify)			
TOTAL EXPENDITURES			
CLOSING BALANCE			

E. GRANT REQUEST

MINISTRY UNIT ACTION

_____ requests a grant of \$ _____.
Name of Project/Pastoral Charge/Mission Unit or Individual

We believe this application qualifies for the following Bequest Funds _____.

Signature by Representative of Project or Individual

Date

PRESBYTERY OR REVIEW GROUP ACTION (Not necessary for individuals)

_____ recommends that the above Project/Pastoral Charge/Mission Unit receive a grant of \$ _____ from Maritime Conference Bequest Funds.

Signature of Presbytery Secretary or Review Group

Date

CONFERENCE ACTION

Maritime Conference Financial Support Unit has assessed and found the application to meet the requirements of the following Bequest Fund(s).

_____	_____
<i>Bequest Fund</i>	<i>Amount</i>
_____	_____
<i>Bequest Fund</i>	<i>Amount</i>
_____	_____
<i>Conference Staff</i>	<i>Date</i>

Please, keep a copy of this application for the project's records. Two completed copies should be sent to the Presbytery Mission Support Committee or Review Group. If Presbytery recommends, all copies must be signed by the Secretary of Presbytery who will then forward one copy to the Maritime Conference Office. The Presbytery Mission Support Committee or Review Group will keep one copy. The Conference Financial Support Unit will then review all applications and when a decision is made, the applicant will be notified. If you have any questions regarding this application form, please get in contact with your Presbytery Mission Support Convenor.