ZION UNITED METHODIST CHURCH FUNDRAISING REQUEST

<u>Submit</u> in advance of proposed event Attach Form FRP2 Financial Statement with Proposed Budget Section Completed (See Fundraising Principles, Policies, and Procedures)

REQUESTING GROUP: Group Name Project Leader Phone E-mail Secondary Contact Phone E-mail **EVENT** Purpose and Description of Event: Include proposed publicity and participants Proposed dates/time (See Section III Policies paragraph 2: Use of Church Facilities & Common Spaces) _____Time:____ Dates: Proposed Location **Proceeds** (See Section III Policies paragraph 3: Purpose of Funds) - Anticipated amount to be raised: - Primary beneficiary (\$ amt. or %)- Secondary beneficiary (\$ amt. or %) Please use additional sheet if needed Note: Attach proposed fundraiser budget and submit with Fundraising Request Form **SIGNATURE:** I hereby attest that I have read the Fundraising Principles, Policies and Procedures document of Zion United Methodist Church. I commit to conducting an event in a manner respectful of worship, the church family and staff members; and promise a timely return of the designated space and equipment to a clean and orderly state. Signature of Project Leader Date

Date

Forms FRP1

Church Administrative Council Chairperson

ZION UNITED METHODIST CHURCH FUNDRAISING FINANCIAL STATEMENT

Complete "proposed budget" section. Make 2 copies. Submit one with Fundraising Request Form FRP1 Within month after event, submit second copy with "actual income" section completed.

EVENT:			
INCOME:	PROPOSED BUDGET		ACTUAL INCOME
Donations:			
Sales:			
Services:			
Other:			
Other:			
Total Income:			
EXPENSES:	PROPOSED BUDGET		ACTUAL INCOME
Advertising:			
Materials:			
Products:			
Services:			
Other:			
Other:			
Total Expenses:		·	
Projected		Actual	
INCOME:		INCOM	
VERIFICATION:			
	nsideration of potential income nancial Committee. (Proposed		
Signature of Project Leader			Date
AFTER EVENT:	Project Leader Initials:		
(Complete Actual Inc	come Section & Submit)		Date

Form FRP2