

**JOHN KNOX PRESBYTERY
3.9212 SMALL CHURCH RENEWAL FUND
APPLICATION FORM**

Church Name: _____
Address: _____ Telephone: _____

Contact Persons: _____ Telephone: _____
Active Membership _____ Average Sunday Morning Attendance _____
Total annual budget for current year (all funds) \$ _____

Please attach summary of all finances, including income from contributions, investments and other sources plus expenses for property, personnel, program, debt retirement, etc.

Amount requested: \$ _____

What other funding sources are available? _____

Date funds are needed: _____

Describe specifically how requested funds will be used. (Use additional paper, if needed.)

Please add any other information which may help evaluate your application in light of criteria for funding.

Return to: Fiscal Operations Task Force
 John Knox Presbytery
 P. O. Box 350
 Richland Center, WI 53581