

**EVANGELISM ENDOWMENT FUND**  
**PROJECT REQUEST FORM**

PLEASE TYPE INFORMATION, except when signatures are required. This form must be filled out in its entirety (if you need additional space to complete any of the sections of this form, attach separate pages and mark the sections Exhibit A, B, C, etc., and reference the Exhibit at the question site).

Send the completed, signed request form to:

Pacific Union Conference, ATTN: President's Office, P O Box 5005, Westlake Village, CA 91359;  
or scanned/emailed to [carol@puconline.org](mailto:carol@puconline.org); or by fax to (805) 495-2644 Attn: Carol.

PROJECT NAME: \_\_\_\_\_ PROJECT DATE (s): \_\_\_\_\_  
SUBMITTED BY: \_\_\_\_\_ CONTACT PERSON: \_\_\_\_\_  
ADDRESS: \_\_\_\_\_ PHONE: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_  
PHONE: \_\_\_\_\_  
E-MAIL: \_\_\_\_\_

PROJECT DESCRIPTION: PROJECT OBJECTIVE: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

TARGET GROUP: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

HOW WILL THE PLAN BE ORGANIZED AND IMPLEMENTED: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

EXPECTED RESULTS: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### BUDGET INFORMATION

ITEMIZE ESTIMATED EXPENSE (Be specific - general categories are not sufficient. Attach expanded budget on separate page, if needed):

1. _____	\$ _____
2. _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____
6. _____	\$ _____

**TOTAL ESTIMATED EXPENSE:** \$ \_\_\_\_\_

AVAILABLE INCOME:

Local Church	\$ _____
Local Conference	\$ _____
Offerings	\$ _____
Other	\$ _____

**TOTAL AVAILABLE INCOME:** \$ \_\_\_\_\_

**FUNDS REQUESTED FROM EVANGELISM ENDOWMENT:** \$ \_\_\_\_\_

**TOTAL INCOME:** \$ \_\_\_\_\_

(TOTAL ESTIMATED EXPENSE must equal TOTAL INCOME)

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### SIGNATURES REQUIRED

(Requesting Organization)

\_\_\_\_\_  
NAME OF ORGANIZATION / PERSON SPONSORING PROJECT      SIGNATURE      DATE

\_\_\_\_\_  
NAME OF PROJECT DIRECTOR      SIGNATURE      DATE

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### SIGNATURES REQUIRED

(Local Conference or Institutional Officers)

\_\_\_\_\_  
PRESIDENT or TREASURER      SIGNATURE      DATE

\_\_\_\_\_  
NAME OF CONFERENCE / INSTITUTION

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