

Release God's Power Fund

American Baptist Churches of Pennsylvania and Delaware

Grant Request Form

Date: _____

Group Submitting Request: _____

Address: _____

Amount Requested: _____

Contact Person: _____

Address: _____

Telephone #/E-mail Address: _____

.....
Please **TYPE** ALL Answers. Please forward this request on to the Regional Pastor in your corridor.

Nature and purpose of the grant request:

Time Frame and Total Projected Cost:

Other Sources of Funding:

Evidences of long-range, cooperative planning:

Does your church financially support **ABCOPAD's Partners in Ministry Emphasis**? Yes _____ No _____

Has your church submitted their **Cooperative Church Annual Report** this year? Yes _____ No _____