

FIRST BAPTIST CHURCH OF MIDLAND FOUNDATION

APPLICATION FOR FUNDING

1. Name of Entity _____

2. Physical Address _____

3. Mailing Address _____

4. Email Address _____

5. Website _____

6. Work Phone # _____

7. Home Phone # _____

8. Cell Phone # _____

9. Fax Phone # _____

10. Principal Activity?

11. How long have you operated under your current name?

12. How long have you been located at your current physical address?

13. Name of Executive Officer? _____

13a. How long has this Executive Officer been in this position?

14. What type of organization?

15. How are the members of your governing body selected?

16. Give a brief description of how your organization serves the public?

17. If your organization works with other agencies or institutions serving a similar public need, give the name of that organization(s) and describe your relationship with them.

18. What is your primary source of funding?

19. In an attachment, set out in detail your current operating budget and the actual operating expenses by the same items for the latest fiscal year.

20. How much of your operating budget have you received from charitable institutions in each of the last two years?

21. How much support have you received for non-operating expenses in each of the last two years?

22. What projects were completed with this assistance?

23. In an attachment, set out major gifts or donations to you in each of the last three fiscal years and the project(s) designated for each gift. Indicate which gifts or donations were designated or used for operating expenses.

24. List by name and title all full-time and part-time employees being paid by your entity.

25. Name of your bank? _____

25a. Address of your bank? _____

26. Names of individuals in your organization who are authorized to make deposits and/or withdrawals from your account?

27. What is the immediate need(s) prompting this request?

28. Amount of your request (please provide a specific dollar amount)?

29. What percent of the total cost of the project will this amount cover?

30. What is the latest date by which you need to know whether all or any part of this request will be granted?

31. Please provide the name, addresses, and phone number for up to three (3) members of First Baptist Church as references (if any).

a. _____

b. _____

c. _____

32. Provide the name, address, and phone number of three (3) additional references for this application.

a. _____

b. _____

c. _____

Dated: _____

Signed: _____

Title: _____

If additional sheets are attached in response to a question, please indicate the question number prior to the response.

RETURN COMPLETED FUNDING APPLICATION TO:

First Baptist Church of Midland Foundation
P. O. Box 5485

Midland, Texas 79704

Phone 432-683-0659