

Hawaii Church of God

Financial Assistance Request

Church: _____ Island: _____

Address: _____

City State Zip Code

Phone: (____) ____ - ____ Email: _____

Website: _____ Social Media: _____

Person Making Request

Name: _____ Position: _____

Address: _____

City State Zip Code

Phone: (____) ____ - ____ Email: _____

Request Details

Amount Being Requested: \$ _____

Date Requested: ____/____/____ Date Funds Needed: ____/____/____

Purpose of Requested Funds:

- | | |
|---|--|
| <input type="checkbox"/> Assistance with Church Bills | <input type="checkbox"/> Assistance with Mortgage/Rent |
| <input type="checkbox"/> Assistance with Emergency | <input type="checkbox"/> Assistance with Special Project |

Please give specific details regarding the purpose of the request: _____

Use additional page(s) if necessary.

Project Description

Complete the following if the funding request is for a special project to improve the church facilities/properties.

Project Title: _____

Project Objective(s) - Clearly state the objectives and goals of the project: _____

Project Scope - Describe the scope of the project, including the duration and reach: _____

Project Timeline - give detailed timeline for the complete project: _____

Benefits / Beneficiaries - Identify what the benefits of this project will be, who it will benefit, and how it will benefit them: _____

How will this project intergrate with and enhance the overall ministries of Hawaii Church of God? _____

Total Cost of the Project - including all permits, variances, blueprints, materials, labor, and misc.:
\$ _____

Detailed breakdown of costs:

Permits \$ _____ Variances \$ _____ Fees \$ _____

Blueprints/Drawings \$ _____ Engineering \$ _____

Environmental Studies \$ _____

Materials \$ _____ Labor \$ _____ Travel \$ _____

Lodging \$ _____ Meals \$ _____ Other \$ _____

Describe other costs: _____

Have you included potential cost overages? _____ If yes, what is the estimated amount set aside for potential cost overages? \$ _____

Current Financial Condition

Current account totals:

Checking Account(s)	\$ _____	\$ _____	\$ _____
Savings Account(s)	\$ _____	\$ _____	\$ _____
CDs, Money Markets, Other Investments	\$ _____	\$ _____	\$ _____
	\$ _____	\$ _____	\$ _____

Amount on hand for the need for which assistance is being requested \$_____

Value of current church properties:

Church \$			
Parsonage \$			
Other Buildings \$	\$		\$
Other Properties \$	\$		\$

Indebtedness of current church properties:

Church \$			
Parsonage \$			
Other Buildings \$	\$		\$
Other Properties \$	\$		\$

Breakdown of current account totals:

General Fund \$ _____
Building Fund \$ _____
Designated Funds \$ _____

List of Designated Funds:

[illegible]

Current amount due on all monthly/quarterly/annual bills:

[illegible]

Requirements for Funding Consideration

To be eligible for consideration for funding / financial assistance from the Hawaii Church of God State Executive Office all of the following must be met:

___ Church must be Current in Monthly Church Reporting with Monies Paid.

☐ International Offices ☐ Hawaii State Office

___ Pastor must be Current in Monthly Ministerial Reporting .

☐ International Offices ☐ Hawaii State Office

___ Submit an up to date 1 year Profit / Loss Statement for the church.

___ Copy of Proof of Insurance for all church owned properties.

___ Copy of most recent termite inspection report.

___ Copy of proof of payment of all taxes and assessments on church properties.

___ Did Pastor / Pastor Spouse attend / participate in the most recent?: (circle yes or no)

Camp Meeting Yes No

Women's Conference Yes No

Women's Book Study Yes No

Men's Conference Yes No

Ministers Meeting Yes No

District / Regional Gathering Yes No

Resourcing ZoomCast Yes No

For State Office Use Only

___ Full Grant - Amount \$_____

___ 50% / 50% Matching Grant - Amount \$_____

___ 0% Interest Loan - Amount \$_____

___ Other - Amount \$_____ Details: _____

___ Denied - Reason: _____

Date Received	___/___/___
Date Determined	___/___/___
AB	
AB & EV	
AB & State Council	
Date Informed	___/___/___