

## REQUEST FOR DISBURSEMENT OF FUNDS

To: Congregational Trust Fund Committee,  
Trinity Lutheran Church

Request Date \_\_\_\_\_

Rec'd by Committee \_\_\_\_\_

Organization: \_\_\_\_\_

Email: \_\_\_\_\_

Contact Person: \_\_\_\_\_

Phone: \_\_\_\_\_

Signature

When requesting support from the TRINITY LUTHERAN CHURCH TRUST FUND, please respond fully to the queries on this form. Attach additional information as appropriate to clarify and elaborate. The committee will evaluate the request based on written information you provide, and may ask for a brief oral presentation.

- 1) Describe Request** as a project or program of Christian outreach, a new activity, or some other type of request. Please reflect upon how the request might further the gospel of Jesus Christ. Also discuss how this request extends beyond the scope and intent of the regular annual budget of Trinity Lutheran Church.

- 2) Why should this be supported?** (Most compelling reason)

**Financial Details:**

**When needed:** \_\_\_\_\_

**Amount Requested: \$** \_\_\_\_\_

**Future Obligations? How much and for how long?**

**Date reviewed by Congregational**

**Trust Fund Committee** \_\_\_\_\_

**Amount Approved: \$** \_\_\_\_\_

**Request Granted:**

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**Request Denied:**

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Requires four signatures of duly elected Trust Fund Committee Members

**Brief Committee Opinion:**