

Special Grant Fund Allocations
Request for Funding
February 2015

Activity Title _____ Date _____

Requested by _____

Name _____ email _____

Address _____

City, State, Zip _____ Phone _____

Description of Activity

Spiritual benefit to the applicant:

Spiritual benefit
to Meeting

Activity Cost \$ _____ Date Funds Required _____

Amount Requested \$ _____

Worship & Ministry of Orange Grove is the granting committee _____

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