



Friendship Missionary Baptist Church
 3400 Beatties Ford Road, Charlotte, NC 28216, Phone: 704-392-0392; Fax: 704-391-5800
 Dr. Clifford A. Jones, Sr., Senior Minister

CHURCH ORGANIZATION BUDGET REQUEST FORM (SIDE 1 OF 2: AMOUNT REQUEST)

PLEASE PROVIDE A BRIEF SUMMARY OF EACH ACTIVITY/EVENT FOR WHICH FUNDS ARE BEING REQUESTED. In your summary, please include the month(s) for which activity funds will be needed (i.e. December, April—June, etc.), the total amount requested for the event this year and how much, if any, was allotted last year for the event.

THIS FORM IS TO BE COMPLETED AND TURNED IN TO YOUR RESPECTIVE DEIVISION MINISTER .

Church Organization: _____

DeiVision: _____

	ACTIVITY	MONTH(S) FUNDS NEEDED	AMOUNT REQUESTED	PRIOR YEAR AMOUNT REQUESTED
1			\$	\$
2			\$	\$
3			\$	\$
4			\$	\$
5			\$	\$
6			\$	\$
7			\$	\$
8			\$	\$
9			\$	\$
10			\$	\$
	CARRY FORWARD AMOUNT**		\$	\$
	TOTALS		\$	\$

Please list honoraria, conferences/conventions and mission allocations below, separate from the total above.

i.			\$	\$
ii.			\$	\$
iii.			\$	\$
iv.			\$	\$
v.			\$	\$
vi.			\$	\$
vii.			\$	\$

**** Carry Forward Amount.** If you have more than 10 activities requiring funding, please attach a sheet describing those events as done above. Total the funds needed on the separate sheet and write in that total as the Carry Forward Amount above.

*On side 2 of this form, please describe the purpose for each current year line item amount requested above.
 Budget items will not be considered without purpose descriptions.*

Required Approvals:		Acct #: <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>
Organizational Chairperson _____	Date _____	(Staff Use Only)
DeiVision Minister _____	Date _____	Fund: <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/> <input style="width: 20px; height: 20px;" type="text"/>



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(SIDE 2 OF 2: ACTIVITY DESCRIPTIONS)

*Please briefly describe the activity listed on Side 1 of this page beside the corresponding activity number.
 Event descriptions are mandatory for approval consideration.*

Church Organization:

DeiVision:

ACTIVITY #	ACTIVITY DESCRIPTION
1	
2	
3	
4	
5	
6	
7	
8	
9	
10	