



Hartman/VanFleit Grant Application
Deadline for application is October 1st

Application Date _____	Deacon	Elder	Birth Date _____
Full Name _____			Ordination Date _____
Address _____			Main Phone _____
City State Zip _____			Work Phone _____
Email _____			District _____

FINANCIAL STATEMENT DETAILS

Assets:

Current

Cash on Hand:	Checking	\$ _____
	Savings	\$ _____
Investments (stocks, CDs, not IRAs)		\$ _____
Money owed to you		\$ _____

Intermediate

Car(s)	\$ _____
Retirement Ccts. (IRA, 401K, etc.)	\$ _____
Life Insurance (cash value)	\$ _____

Long Term

House	\$ _____
Other Real Estate	\$ _____
Any other asset	\$ _____
Total Assets	\$ _____

Liabilities:

Current

Short-term loans	\$ _____
Credit card debt	\$ _____
Taxes due (accrued as of today)	\$ _____
Money owed to others	\$ _____

Intermediate

Student Loan(s) applicant and spouse	\$ _____
Car(s)	\$ _____
Home equity	\$ _____

Long Term

House mortgage	\$ _____
Real estate debt	\$ _____
Any other Liability	\$ _____
Total Liabilities	\$ _____

Net Worth \$ _____

Source of Income for the year

	<u>Applicant</u>	<u>Spouse</u>	Total
Salary	\$ _____	\$ _____	\$ _____
Housing allowance, if any	\$ _____	\$ _____	\$ _____
Honorariums and bonuses	\$ _____	\$ _____	\$ _____
Interest and dividend income	\$ _____	\$ _____	\$ _____
Net income from rentals	\$ _____	\$ _____	\$ _____
Alimony, child support	\$ _____	\$ _____	\$ _____
other	\$ _____	\$ _____	\$ _____
		Total Family Income	\$ _____

Annual Expenses

Housing/utilities	\$ _____		
Food	\$ _____	Loan Payments	\$ _____
Transportation	\$ _____		\$ _____
Clothing	\$ _____		\$ _____
Medical	\$ _____		\$ _____
Entertainment	\$ _____		\$ _____
Donations	\$ _____		\$ _____
Gifts	\$ _____		\$ _____
Personal care	\$ _____		
Phones	\$ _____		
Other	\$ _____		
Total expenses	\$ _____	Total loan payments	\$ _____

Note: Please attach a letter explaining any special circumstances the Gifts and Grants Committee should be aware of when considering your application.

The information on this application has been carefully completed and read by the undersigned and is given for the purpose of securing a grant. I (we) hereby certify that the information contained herein is a correct and accurate indication of my (our) financial condition. I (we) agree to notify the Foundation immediately of any significant changes in our financial condition. I (we) understand the information provided in this grant application may be shared with the Grants Committee, the Conference Cabinet and other committees as necessary to act on my request per the condition of the endowment.

Signatures:

Applicant _____ Date _____

Spouse _____ Date _____