

KIRBY WOODS BAPTIST CHURCH
6325 Poplar Avenue, Memphis, TN 38119
(901) 682-2220 FAX: (901) 682-1747 E-mail: Missions@kwbc.org

REQUEST FOR FUNDS FOR MISSIONARY SUPPORT
To be Submitted to the Missions Office – Append Additional Sheets as Necessary

PERSONAL INFORMATION

Name: _____ Date of Birth: _____

Address: _____

Passport Number: _____ Expiration Date: _____

Home Phone: _____ Work Phone: _____

FAX: _____ E-mail: _____

Education Background: _____

Vocational Background: _____

Name of Spouse: _____ Date of Birth: _____

Names and Dates of Birth of Children: _____

MISSIONARY ORGANIZATION

Name: _____

Address: _____

Executive Director: _____ Telephone: _____

FAX: _____ E-mail: _____

Country of Assignment: _____

Field Address: _____

Director of the Mission: _____ Telephone: _____

FAX: _____ E-mail: _____

DESCRIPTION OF THE PRIMARY WORK OF THE MISSION

Please describe the work of the mission and attach a copy of the mission's doctrinal statement

FUNDS BEING REQUESTED

Amount of One-Time Funds Requested: _____
Date the Funds are Needed: _____
Amount of Monthly Funds Requested: _____
Date the Monthly Funds Are to Begin: _____
Date the Monthly Funds are to End: _____
Cumulative Amount of Monthly Funds Requested: _____
Total Amount of One-Time Funds and Monthly Funds: _____

SPECIFIC PURPOSE FOR WHICH FUNDS ARE NEEDED

SIGNED: _____ **DATE:** _____

Mission Committee Use Only

Original Request Received by: _____ Date: _____

- _____ "Personal Testimony of Person Requesting Mission Funds" (Form MC-1(b))
- _____ "Request for funds for Missionary Support" (Form MC-20)
- _____ Copy of the Mission's Doctrinal Statement
- _____ Recent Photograph of Individual and Family
- _____ Letter of Personal Reference _____
- _____ Letter of Personal Reference _____
- _____ Letter of Personal Reference _____

Committee Action: _____

_____ Date: _____

Chairman: _____ Minister of Missions: _____

Check Disbursed:

Date: _____ Check Number: _____ Account #: _____ Amount: _____

Monthly Checks Begin: _____ End: _____ Amount: _____