

# Our Saviour's Endowment Committee Application for Funds

Please check one:

Capital Improvement       Community Outreach       Missions

Please check one:

Committee     Individual     Organization     Event     Other

Date of Application \_\_\_\_\_

## Applicant Information

Organization/Committee: \_\_\_\_\_ Contact Person: \_\_\_\_\_

Address: \_\_\_\_\_

*Street Address*

\_\_\_\_\_

*City*

\_\_\_\_\_

*State*

\_\_\_\_\_

*ZIP Code*

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

Member of OSLC:  Yes     No    If No how did you hear about us? \_\_\_\_\_

If an event are there any co-sponsors? \_\_\_\_\_

Funding Amount Requested: \_\_\_\_\_

Description of how funds would be used if awarded:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### Return Completed Form to Our Saviour's Lutheran Church Office

Our Saviour's Lutheran Church, 19001 Jackson St. NE, East Bethel, MN 55011

Phone: 763-434-6117 Fax: 763-434-0394 Email: [olsc@oursaviourslc.org](mailto:olsc@oursaviourslc.org)

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### Endowment Committee Use Only

Check # \_\_\_\_\_ Amount Approved: \_\_\_\_\_

Capital Improvement       Community Outreach       Missions