

St. John Neumann Catholic Church Good Samaritan Ministry Required Form to Request Funds

Requestor Name:	_Date:
Parishioner of St. John NeumannYesNo Parishioner of	parish
Requestor Phone Number:	
Requestor E-mail address:	
Grantee Name:	
Grantee Mailing Address:	
Grantee E-mail: Grantee Phone:	
Is the Grantee anIndividualNon-profit CorporationC	Other (Please explain)
Grantee website address:	
How is Requestor involved in or volunteering to assist the Grantee?	
Amount of Request \$ Is the Grantee providing any match?	
What is the total project cost? \$	
When are funds needed?	
Are other SJN groups being asked to assist in funding? If so, which groups and	how much?

How does this grant affect the community's faith life relating to mercy, outreach and/or discipleship?
Please answer the following with as much detail as possible:
1. Describe the purpose of the project:
2. Describe how the funds will be used:
3. What are the expected results of this project?
When will the project be completed?
Will there be an opportunity for volunteers to participate in the project?
will there be an opportunity for volunteers to participate in the project:
If so, how many volunteers are needed, and for how much time?
Volunteers Total Volunteer Hours
Return form to:
Linda Stoverock,
GSM Secretary
<u>Istoverock@gmail.com</u>
Please note the Good Samaritan Ministry Board typically meets the second Wednesday of each
month (except December). Please send all requests at least ten days before the meeting for
consideration.
For GSM Use Only
Amount of Funds ApprovedDate Approved
Disbursement instructions
Reporting Requirements Follow-up date
Follow-up date