

Evangelism/Church Growth

ALLOCATION REQUEST FORM: For multiple evangelistic events, please fill out a request form for each.

Church information					
Church name:		Pastor:			
Contact Person:	Email:		_		
OUTREACH INFORMATION					
Date(s):	Location:	Target Group:			
Evangelistic Event Name:					
OBJECTIVE (Please describe wh	nat the objective is)				
Follow Up (How will the plan be	organized and implement	ented?)			
Description:					
			_		
EXPECTED RESULTS					
Description:					



Evangelism/Church Growth

Budget Projection

Name of Sponsoring Church:

Estimated Expenses

INCOME	BUDGET AMOUNT
Local Church Funds	
Meeting Offerings (estimated)	
Conference Subsidy (request)	
Other	
Total Income	
EXPENSES	
Advertising Expenses:	
Handbills/Flyers	
Newspaper	
Radio/TV	
Others	
Preparation Expenses:	
Preparation Seminars	
Small Group Materials	
Bible Workers	
Visitation Materials	
Other	
Material Expenses:	
Bibles	
Ticket Books/Scan Cards	
Incentives – Giveaways	

Sermon Outlines	
Decision Cards	
Offering Envelopes	
Other	
Guest Speaker Expenses:	
Housing	
Travel	
Honorarium	
Per Diem	
Other	
Misc. Expenses:	
Music	
Venue Rentals	
Equipment (Total no more than 20%	
of conference allocation)	
Equipment Purchases	
Children's Program	
Follow Up Expenses:	
Follow-up Material	
Spiritual Gifts	
Assessment/Placement	
Spiritual Formation Training	
Ministry Training	
Other	

When completed and signed, please make a copy for your records and submit this request to the Evangelism Department for consideration. This form will not be processed without your signature at the end of this form.

Requested by:	
Pastor:	Date:
Treasurer:	Date:
Church Board Approved Date:	(please attach a copy of minutes
Daytime Phone Number:	