

Lutheran Church of Peace Benevolence Request form



This form must be filled out completely for all financial requests. All financial requests will be prayerfully considered and you will be notified of decisions by phone. Information provided by you will be shared with Pastors and Benevolence Team as needed

Date Requested _____ Needed By date _____

Name _____ DOB _____

Address _____ City _____ State _____ Zip _____

Home Phone # _____ Cell Phone # _____

Email Address _____

Amount Requested _____

Reason For request _____

Has the Lutheran Church helped you financially in the past? Yes No

Date Helped _____ Amount Given _____ Reason for Help _____

Marital Status Married Divorced Separated Single Widowed

Spouse/Significant other name _____

of children in the home _____ # of Adults in Home _____

Name & Age of all children in home _____

Employed yes No Employer _____

Do you attend Lutheran Church of Peace Yes No

Do you attend another church Yes No Name of Church attending _____

Payment to be made to: _____

**Please be aware that the Lutheran Church of Peace receives many requests
And is not able to give financial help to everyone who requests it.**

For office use only

Approved Yes No

Approved by _____

Approved amount _____ Date Given _____