

Grant Application

Title _____ First Name _____ MI _____ Last Name _____

Address _____ City _____ St _____ Zip _____

Home Phone _____ Cell Phone _____

Church Name _____

Address _____ City _____ St _____ Zip _____

Church Phone _____ Email _____

How long has your church been a member of the Oklahoma State Council _____

How long has your church been established _____

Purpose of Grant Request _____

Requested Amount \$ _____

Pastor's Signature _____ Date _____

Church Secretary Signature _____ Date _____

District Elder Signature _____ Date _____

Special Note: When application is submitted, please provide us with the actual invoice, receipt or proposal. Upon approval funds will be disbursed to designated vendor.

Upon receipt of the awarded amount, there may be an on sight visit by the Oklahoma State Council Representatives or Executive Board Members. The church or ministry must agree to use grants or gifts from the Oklahoma State Council in ways that are consistent with the purpose of the Adams Kingdom Building Fund. In turn the church or ministry must agree not to use funds for any personal use.