

# Salem Baptist District Association Church Extension Application

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<b>CHURCH NAME:</b>	
<b>ADDRESS:</b>	
<b>TELEPHONE:</b>	
<b>PASTOR:</b>	<b>CONTACT NUMBER:</b>

## REQUEST FOR ASSISTANCE

THE ABOVE NAMED CHURCH DESIRES FUNDS IN EMERGENCY TO APPLY TO:

*(Please check one with the requested dollar amount)*

<b>GAS BILL:</b>
<b>ELECTRIC BILL:</b>
<b>REPLACEMENT OF STOLEN OR DAMAGED ITEMS:</b>
<b>PASTORAL TRADEGY:</b>
<b>BUILDING OR MAINTENANCE EMERGENCY:</b>
<b>MEDICAL EMERGENCY:</b>
<b>OTHER:</b>

<b>CHURCH AGREES TO REPAY LOAN AT \$_____ MONTHLY</b>		
<i>(The pastor and 3 below signatures required)</i>		
<b>PASTOR:</b>	<b>DATE:</b>	
<b>CHAIRMAN OF DEACON BD.</b>	<b>DATE:</b>	
<b>CHAIRMAN OF TRUSTEE</b>	<b>DATE:</b>	
<b>DESIGNATED SIGNEE</b>	<b>TITLE:</b>	<b>DATE:</b>