



**Mission**  
*New Mexico*  
STATE MISSIONS OFFERING



## HOPE FUND REQUEST FORM

*Please fill out this form completely. We want to compile the best information we can in order to help us understand your short and long term needs. Our goal is to provide your church with prayer and monetary support during this crisis. We want to assist you in continuing to be a strong Gospel witness in your community.*

1. Name of church \_\_\_\_\_
2. Your name \_\_\_\_\_
3. Your role in the church \_\_\_\_\_
4. Weekly attendance average prior to the Covid Virus crisis \_\_\_\_\_
5. Estimated regular monthly income from tithes and offerings \_\_\_\_\_
6. Estimated regular monthly expenses \_\_\_\_\_
7. Average weekly amount your church has received since March 1, 2020 \_\_\_\_\_
8. Does your church have cash reserves or other resources available? \_\_\_\_yes \_\_\_\_no
9. Is this the first request for your church? \_\_\_\_ yes \_\_\_\_no
10. Has your church applied for the CARES Act stimulus funds? \_\_\_\_yes \_\_\_\_no

We commit to submitting bills or receipts to document expenditures from funds received  
\_\_\_\_yes \_\_\_\_no

**Total Amount you are requesting: \$**\_\_\_\_\_

**Items for which the support is needed:**

Rent/Mortgage payment \$\_\_\_\_\_ Utilities \$\_\_\_\_\_ Property Insurance \$\_\_\_\_\_

Pastor's Insurance \$\_\_\_\_\_ Pastor's Food/Grocery Needs \$\_\_\_\_\_

**Specific Prayer Request(s):**

\_\_\_\_\_

