



**THE D'BRICKASHAW FERGUSON
FOUNDATION**



Date of application: _____

Name of Church _____

Address of Church _____

Telephone # _____

Tax ID # _____

Purpose of grant: _____

Date of Formation of Church: _____

Total Membership: _____

Tithers _____

Other Members _____

Average Monthly Revenue: _____

Fair Market Value of Property _____

Outstanding Mortgages _____

PLEASE PROVIDE THE FOLLOWING INFORMATION:

B u i l d i n g C o m m u n i t i e s O n e B r i c k a t a T i m e





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Proof of Ownership of Property in Question

Names and Addresses of Members of Trustee Board

Names and Addresses of Members of Deacon/Steward Board

Names and Addresses of Associate Ministers

Pastor's Resume

Proof of 501(c) (3) status

Construction/Renovation Proposal with Requisite Municipal
Approvals

Current Audited Financial Statement

Grant request (not to exceed Ten Thousand
\$10,000.00)_____

Receptive of a Site Visit.