

# Benevolent Grant Application



Church: \_\_\_\_\_

Church Address: \_\_\_\_\_  
Street City State Zip

Church Phone: \_\_\_\_\_

Pastor's Email: \_\_\_\_\_

**Describe why funds are needed according to the program guidelines.**

\_\_\_\_\_  
\_\_\_\_\_

**Total amount needed** \$ \_\_\_\_\_

**Amount church is providing** \$ \_\_\_\_\_

**Grant amount requested** – Min. \$250 / Max. \$2,000

(Up to 50% of total amount provided by the church): \$ \_\_\_\_\_

*By signing below, this confirms the church's commitment to provide assistance, which has been or will be disbursed accordingly.*

**Lead Pastor, Church Moderator, or Lead Elder**

Name: \_\_\_\_\_ Title: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please submit this application by mail or email to:

MB Foundation  
P.O. Box 220  
Hillsboro, KS 67063

jwiebe@mbfoundation.com

\_\_\_\_\_ *This section is for internal use only.* \_\_\_\_\_

Signature for approval: \_\_\_\_\_ Date: \_\_\_\_\_

MB Foundation President & CEO

*"Trust in God who richly provides us with everything. Be rich in good works. Be willing to share. Take hold of real life."*

– 1 Timothy 6:17-19