



## Benevolence Application for Members/Regular Attenders

Date \_\_\_\_\_

Name \_\_\_\_\_

Cell Phone # \_\_\_\_\_

Address \_\_\_\_\_

\_\_\_\_\_

*Financial Help:*

Amount of Request: \_\_\_\_\_

Date the Bill Is Due: \_\_\_\_\_

Name and Mailing Address of Business (landlord, electric company, etc.) to Receive the Money:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Money is NOT dispersed to individuals.**

**A copy of the bill is required for the church to consider your application.**

Please email the Benevolence Application and a copy of the bill to [admin@harvestbc.com](mailto:admin@harvestbc.com), give them to the Administrative Assistant on Sunday at church, or mail them to:

Harvest Baptist Church  
29945 Dixon Road  
Salisbury, MD 21804

*Do You Have a Different Need?*

Please explain what kind of help you are requesting and why.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

-----FOR OFFICE USE ONLY-----

Action Taken: \_\_\_\_\_

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