



Rev. Alex da Silva Souto

New Milford United Methodist Church
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Fundraiser Form

Name of Fundraiser: _____

Dates(s) of fundraiser: _____

(Church Council Approval Required before going forward. Please return form to the Church Office for submission to Church Council. Please note, Church Council meets on the 2nd Tuesday of every month.)

Chairperson Name: _____

Phone # cell/home: _____ Email address: _____

Committee/Entity: _____

Purpose: _____

How does this fundraiser comport with the mission and ministry of the church?

Budget: Projected Revenue: \$ _____ Projected Profit \$ _____

Projected Expenses: \$ _____

\$ _____

\$ _____

Will any donations be requested? yes no If yes, please list items and sources

(including NMUMC congregation): _____

Signed: _____ Date signed: _____

Note: Purchase Requisition Form must be completed and submitted to the Finance Committee prior to any purchases being made. Facility Use Forms for both meetings and events (if the church is being used) must be submitted and approved by the Trustees.

Articles for the weekly Sunday Bulletin must be received by Wednesday at 5:00pm for inclusion.

The monthly newsletter is published the first Thursday of the month; articles are due the last Friday of the month at noon. (please see the latest newsletter for any changes to these dates)

Church Use

Approved by: _____ Date Approved: _____ on Church Calendar _____

Notes: _____