Any United Methodist Church

Annual Budget Preparation Worksheet

Min	istry/	Work	Area:								
Line	Item	Name	e:								
Line	Item	No.:			Conta	nct:					
Amo	ount c	of Req	uest:	\$		_]	First R	leques	t? □Y	∕es □	No
Amo	ount I	Last Y	ear: S	\$			Did yo	ou use	? 🗆	Yes 🗌	No
If "yes", amount? \$ Offset Income: \$											
Is this a "one-time" request? \square Yes \square No											
What is the purpose of this ministry?											
Are there other ways this ministry could be funded? \square Yes \square No If "yes", please explain.									No		
	rces:	N	A	N #	T	т 1	A	C 4	0 4	NT	D
Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
Uses	S:										
Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec
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