

**Eastern Mennonite Missions**

**Investment Fund**

**Application for churches**

Please complete and return this form for review by the Investment Committee. If you need more space for your responses, please add exhibits or use the back of this form. It is important to include a cover letter including the location, size, use, and estimated cost of the renovations or new structure. **Tell us about the timing of the project, and when you anticipate needing the funds. Completed applications received by the first of January, April, July, and October will be included in the agenda for consideration in our quarterly meetings.**

E-mail this form, financials, and your cover letter to: [trisha.good@emm.org](mailto:trisha.good@emm.org), or mail to:

**EMM Finance Office  
PO Box 8617  
Lancaster, PA 17604-8617**

**Contact information**

Trisha Good  
Phone: 717 898-2251 ext. 248  
Fax: 717 898-8092  
Email: [trisha.good@emm.org](mailto:trisha.good@emm.org)

Steve Martin  
Phone: 717 898-2251 ext. 211  
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Church \_\_\_\_\_ Pastor \_\_\_\_\_

Address \_\_\_\_\_ Email/Phone \_\_\_\_\_

\_\_\_\_\_ Treasurer \_\_\_\_\_

City/State/Zip \_\_\_\_\_ Email/Phone \_\_\_\_\_

Tax ID number \_\_\_\_\_

Name and phone of person filing this form \_\_\_\_\_

Conference affiliation of your congregation \_\_\_\_\_

	2018	2019	2020	2021	2022
List membership figures for the following years					
List average adult attendance for the following years					

How did you learn about the EMM Investment Fund? \_\_\_\_\_

Location of property to be financed if not as above \_\_\_\_\_

Value of property: Appraisal/year \_\_\_\_\_ Cost \_\_\_\_\_ Current value \_\_\_\_\_

Church annual income \_\_\_\_\_ Loan amount requested \_\_\_\_\_

Church annual expense \_\_\_\_\_ Current fund balances \_\_\_\_\_

Purpose of this loan \_\_\_\_\_

Repayment plans  10 years  15 years  20 years  Other \_\_\_\_\_  
(less than 20 years)

**Tell us about any other loans or obligations that your church currently has:**

Lender name \_\_\_\_\_

Original amount      Date begun      Maturing      Monthly payment      Interest rate      Current balance

\_\_\_\_\_

Lender name \_\_\_\_\_

Original amount      Date begun      Maturing      Monthly payment      Interest rate      Current balance

\_\_\_\_\_

Lender name \_\_\_\_\_

Original amount      Date begun      Maturing      Monthly payment      Interest rate      Current balance

\_\_\_\_\_

**Please give us two references to contact:**

One bank with address and phone

\_\_\_\_\_

\_\_\_\_\_

One other business with address and phone:

\_\_\_\_\_

\_\_\_\_\_

**In addition to filling out the information below, please send a copy of your most recent financials (balance sheet and income and expense statement) plus financials for the latest two years reflected on this sheet.**

**Income**

**Expenses**

	Operating income	Other income	Building fund	Total income	Operating and other expenses	Capital expenses	Total expenses
2018							
2019							
2020							
2021							
2022							



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