



ZION Lutheran Church

1254 S. Union Street, Shawano, WI 54166-3461
715-526-2017 zion@shawanozion.org www.shawanozion.org

REV. SCOTT LUDFORD
Senior Pastor

BOB HASS
Council President

LK Benevolent Fund Grant Application

Date: _____

Committee & Applicant's Name _____

Detailed Request Description:

What is the purpose of the request: _____

How will the requested funds impact the community of Zion: _____

When are the funds needed: _____

Requested Funds Itemized: _____

Total Amount Requested: _____

Signature of Committee Chairperson _____

OFFICE USE Date Approved by Council _____ Council Signature _____