



FINANCING PRE-APPROVAL FORM

Name of Church _____

Address _____

City _____ State _____ Zip _____

Pastor/Minister _____

Contact Person _____

Phone (_____) _____ Church Office (_____) _____

Denomination Affiliation _____

Date Church Organized/Incorporated _____

STAT STICS

Year	Total Income	Attendance
2006	_____	_____
2007	_____	_____
2008	_____	_____
2009*	_____	_____

*Number of months _____ Attendees Ages (#): _____ 0-18; _____ 19-40; _____ 41-60; _____ 60+

Estimated Amount of financing: \$ _____ Purpose of Financing: _____

Current Indebtedness: \$ _____ Estimated value of present properties: _____

Amount you need for construction \$ _____

Have you had a Capital Stewardship Campaign? _____ Date of Campaign _____

Amount Pledged \$ _____ Amount Collected \$ _____ Cash on Hand \$ _____

Funds Expended on project to Date: \$ _____

CHURCH BUILDING SOLUTIONS, LLC.
ATTN: TOM HASTINGS
Fax: 1-800-658-1808
info@churchbuildingsolutions.com