OKLAHOMA INDIAN MISSIONARY CONFERENCE OKLAHOMA VOLUNTEERS IN MISSION

REPAIR/REFURBISH REQUEST FORM

		sanctuary parsonage fellowship hall Retired Clergy Region Facility
I.	LOCAL CHURCH DAT	A: (ALL information must be filled out to be accepted)
	Name of Charge:	Date:
	Name of Church:	
	Address:	Phone:
	Address:	Phone:
		Phone:
	Email:	County:
	·	an pastor) Possible Mission Site Coordinator:
		Phone:
		Email:
	Possible Mission Site Hos	st:
	Name:	
	Address:	Phone:
		e-mail:
II	Refinish – Refurbish:	
		Materials Needed
	Windows	Number Size (wood, alum, etc.) Cost/Item
	Doors	
	Roofing	
	Exterior	

All signa	tures must be present when submitting applic	cation.	
District S	Superintendent	Date	
Pastor/La	ny Missioner		
Mission S	Site Host	Date	
Mission S	Site Coordinator	Date	
	OLLOWING SIGNATURES CERTIFY TIPATED IN THE FORMULATION OF THIS R	THAT THESE PERSONS REQUEST.	HAVE
c.	TOTAL AMOUNT TO BE RAISED (a-b)	\$	
b.	TOTAL AMOUNT ON HAND	\$	
a.	TOTAL COST	\$	
	Painting Painting		
_	Electrical		
	Plumbing		
	Cement Work		
	Flooring		
_	Interior		