

ENGLISH DISTRICT LMWL
2012 MISSION GRANT PROPOSAL COVER SHEET

PROJECT NAME: _____

SUBMITTED BY: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE NO: WORK _____ HOME: _____

E-MAIL: _____

NAME OF DISTRICT, ZONE OR SOCIETY

LWML PRESIDENT'S APPROVAL: _____

Signature

NAME OF PASTOR OR SYNODICAL REPRESENTATIVE'S APPROVAL:

Signature

PROJECT ADMINISTRATOR: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____ EMAIL: _____

FUNDS WILL BE SENT TO: _____

STREET ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE: _____

Please include six (6) copies of the Cover Sheet, the Resolution, and the Information Brief for each grant proposal submitted. All proposals should be sent to Margaret Stuenkel, Vice President of Gospel Outreach, 32905 Mills Road, North Ridgeville, OH 44039 to arrive no later than **May 15, 2011**.