



**California- Nevada Annual Conference
The United Methodist Church**

BOARD OF MISSIONS

P.O. Box 980250/West Sacramento, CA 95796-0250

Tel: (916) 374-1500

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grant was taken **PATTON FUND APPLICATION**

For Church Extension

Amount Requested \$

Project Number: _____

Sponsoring Organization _____

Check will be sent from the Trust Office of the UM Foundation to:

Conditions:

Explain the goals expected to achieve:

Provide documentation showing the source of all funds and projections of expenditures and income.

Who will benefit from this grant?

At the completion of this grant period, the project shall submit a report, which outlines the successes or failures of the project.

As a representative of the project/sponsoring organization, I have read this form and agree to comply with the terms and conditions of this grant.

Signature: _____

Print Name and Title _____

If you have questions about this grant, please contact:

Dina Stenwick

United Methodist Center

P.O. Box 980250

West Sacramento, CA 95798-0250

Or call (916) 374-1525 or e-mail: dinas@calnevumc.org