Email

# ILLINOIS CONFERENCE
# Evangelism Request Form - 2019

Please fill out the form below completely and email it to pbraman@ilcsda.org

Date _____

Pastor _____

Church _____

Church Board Approval Date _____

Amount of Fund Requested _____

Description of Evangelism Activity:

_____

_____

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Do we have permission to use your evangelism plans for resource ideas with other pastors or churches? Click - Yes ◯ or No ◉

| For Office Use Only | | | |
|---|---|---|---|
| Date Request was received | | Date Funds were Distributed | |
| Approved by | | | |