

**Confidential Request for Assistance from the Joe and Lois Perkins Fund
for Retired Ministers and Surviving Spouses of the North Texas Annual Conference**

Request for Assistance for Unanticipated Financial Needs
PLEASE RETURN TO THE CONFERENCE BY December 1, 2023!

I would like to request financial assistance from the Joe and Lois Perkins Fund. I (we) have experienced unanticipated financial needs(s) in the area(s) of:

(If these expenses have occurred in the last twelve months, please provide name(s) of service or provider(s), amount billed, and a copy of the estimate, bill or receipt. These amounts must be approved by the committee as stipulated in the Endowment Fund Documents.)

Healthcare Expenses* (e.g., hearing aids, glasses, dental, hospitalization, pharmacy including “donut hole” costs of medications, etc.)

_____	\$ _____
_____	\$ _____
_____	\$ _____
Total	\$ _____

Other Unexpected Expenses* (e.g., home repairs such as air conditioner and heating repair, plumbing repair, car repairs, storm damage not covered by insurance, funeral expenses, etc.)

_____	\$ _____
_____	\$ _____
_____	\$ _____
Total	\$ _____

*These lists are intended as examples of financial need and not as complete lists. You may have other unanticipated financial needs that are not listed but would be applicable.

Date: _____

Name: _____

Street: _____

City, State, Zip: _____

Phone: _____

E-Mail: _____

Signature: _____