## <u>Confidential Request</u> 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 September 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:

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

<b>Healthcare Expenses</b> * (e.g., hearing aids, glasses,	dental, hospitalization, pharmacy inc	cluding "donut
hole" costs of medications, etc.)	\$	_
	<b>\$</b>	_
	\$	_
Total	\$	_
Other Unexpected Expenses* (e.g., home repairs repair, car repairs, storm damage not covered by instance of the covered by		epair, plumbing
	\$	_
	\$	_
	\$	_
Total	\$	_
*These lists are intended as examples of financial nunanticipated financial needs that are not listed but		ay have other
Date:		
Name:		
Street:		
City, State, Zip:		
Phone:		
E-Mail:		
C:		