



## Financial Request Form

Submit 60 days prior to event and return to:  
Prison Ministry of Upstate New York  
PO Box 10106  
Rochester, NY 14610

DATE: \_\_\_\_\_

Dear PMUNY:

I am requesting financial support in the amount of \$\_\_\_\_\_ for the following prison ministry.

Name of Prison Ministry, (i.e. REC#29): \_\_\_\_\_

Contact person/director/rector: \_\_\_\_\_

Address: \_\_\_\_\_

Telephone: \_\_\_\_\_ Email: \_\_\_\_\_

Location of this event \_\_\_\_\_

Dates: \_\_\_\_\_ through \_\_\_\_\_

Volunteers involved \_\_\_\_\_

Residents to be served \_\_\_\_\_

Facility chaplain: \_\_\_\_\_

Contact information: \_\_\_\_\_

All participants will be volunteers and there will be no payments to anyone for services. Possible Honorariums and expenses for ordained ministers may be paid. In Kind Contributions may be solicited and received from volunteers, other organizations and vendors. At the conclusion of the REC I will prepare a **final report** that will show the consolidated income and expenses for all activities related to this event.

**I am attaching a tentative budget that outlines anticipated expenses.** I understand that Prison Ministry of Upstate New York (PMUNY) is a program under the Ecumenical Ministries of Perinton, Inc. (EMP) which is a 501(c)(3) tax-exempt nonprofit organization under United States Internal Revenue Code (26 U.S.C. § 501(c)). Under this program PMUNY is exempt from payment of New York State and local sales tax. Exempt Purchase Certificates provided under this arrangement will also be kept under my control.

Payment to this REC, if any, should be made by check payable to me: \_\_\_\_\_

The **Final Report** will include a **consolidated accounting of total revenue and expenses and attendance statistics, (number of volunteers and number of residents)**, that PMUNY may use in promoting the program and recruiting volunteers. The report will be **submitted to the PMUNY P.O. Box within one month of the completed event.**

Sincerely,

\_\_\_\_\_  
Title: