2024 ELCC THRIVENT ACTION TEAM PROJECT REQUEST FORM
Complete this form to the best of your ability. It will be used by the Thrivent member to apply for funds.

Project Leader Name: _____

Contact info-email address: _____ cell phone: _____

Project Date: _____

Project Title: _____

Project Type:(check one) _____service _____ fundraising _____ education

Describe your project: include specific actions you & your team will be taking together to make an impact, specific outcomes you hope to make...

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Associated Organization: (check one)
_____ Evangelical Lutheran Cokato _____ other - Name of other organization: _____

Amount of funds needed-up to $250 _____

How do you plan to use the money? (check one)
____promotions _____ food _____ venue fees _____ supplies _____ other use

Do you need Thrivent Action Team t-shirts for your team? If so, how many (maximum of 25) & what sizes(available sized Adult small to 2XL & Youth small to large

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Estimated Project End Date: _____

Note: The funds need to be requested no less than 14 days & no more than 120 before the start of your project.
- The funds will come as a Visa credit card valued up to $250. You will use the card to pay for related expenses for your project or activity.   Thrivent does not allow purchases of gift cards, alcohol, firearms or jewelry, direct cash donations, cash withdrawals, organizational operating funds, personal expenses, or purchases made outside the U.S. or its territories.

As the Project Leader you will be expected to use the funds for only the designated project & for the designated use. You will also need to retain all project receipts for one year as your project may be audited by Thrivent & the receipts may need to be submitted to them.

At the conclusion of your project, you will need to let the Action Team coordinator know so the project can be "closed" with Thrivent.

If you have questions about completing this form, contact Patti Albrecht at patticfo@aol.com or at 612-670-4596(text or call)

Information Need at the end of your project
This will be submitted by the Thrivent member to Thrivent

If your project was a "service" project:

_____ number of volunteers   _____ length of event

If your project was a "fundraiser:

_____ number of volunteers   _____length of event   _____ funds raised

_____ items collected & quantities   _____number of attendees

If you project was an "educational" event:

_____ number of volunteers   _____ length of event   _____ number of attendees