

Memorial United Methodist Church

Date:

To: Facilities Project Team

Project consists of: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Anticipated costs: \_\_\_\_\_

Project is considered:

1. Emergency
2. Non-Emergency/Needs to be accomplished.
3. Nice to have.

Requested by (Name of Group of Person): \_\_\_\_\_  
\_\_\_\_\_

Signed \_\_\_\_\_

General use for people to make proposals to Board of Trustees or Church Council