

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 jail/prison ministry:

Name of Jail/Prison Ministry: _____

Contact person/director: _____

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. Honorarium and expenses for ordained minister may be paid. Funds will also be solicited from other individuals and organization and all funds will be under my control. In Kind Contributions will be solicited and received from volunteers, other organizations and vendors. At the conclusion of this jail/prison ministry program 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, 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 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,
