



## HELPING HANDS FUND GUIDELINES

St. Mark's Lutheran Church

140 S. Green Bay Road, Neenah, WI 54956 \* 920-725-2828 \* officestmarksneenah.org

*My command is this: Love each other as I have loved you. - John 15:12*

The purpose of the Helping Hand Fund is to provide financial aid to an individual who is in need on an urgent basis. The Helping Hands Fund may not be applicable for cases which need long-term financial support. The church has the right to adjust or to disapprove an applicant's request and may consider providing assistance other than monetary help (e.g., food, clothing, or transportation).

Applicants are not granted financial assistance based on relationships between church leaders/members or being a significant church contributor. The church does not discriminate between applicants based upon race, color, sexual orientation, national origin, age, disability, or gender.

### Oversight of Helping Hands Fund

- The Social Ministry Committee, under the oversight of the Pastor, shall have the responsibility for overseeing the Helping Hands Fund.
- The anonymity of anyone requesting assistance will be preserved with the exception of the Social Ministry Committee, the Pastor, Office Administrator, and Treasurer.

### Source of Funding

- The Helping Hands Fund shall receive income from the receipt of special contributions by individuals and/or families wishing to make a donation to the Fund.
- If undesignated funds come into the church, the Church Council may approve those funds be deposited into the Helping Hands Fund.
- Contributions to the Helping Hands Fund may not be earmarked or otherwise designated for particular purposes or recipients.

**Recipients of Assistance** – In general, to assist with prioritizing assistance, recipients shall be:

- Members of St. Mark's Lutheran Church
- Attendees of St. Mark's Lutheran Church
- Members of the community/area

### Guidelines for Disbursement

- Intended to be a means of assistance during the time of a crisis or other hardship.
- Disbursements from the Helping Hands Fund may not be made in the form of a loan.
- All disbursements from the Helping Hands Fund shall be made directly to the party or entity to whom payment is due and not in the form of cash given directly to the individual or family requesting assistance (e.g., if assistance with rent or a mortgage payment is needed, payment shall be made directly to the individual's or family's landlord or mortgage holder).

### Application and Approval Process

Individuals or families seeking assistance from the Helping Hands Fund shall follow the steps below:

- Obtain and submit a Helping Hands Application.
- Submit supporting documentation, such as utility or medical bill.

Review and approval of the application, as well as communication of the amount and form of assistance, shall be done by a member of the Social Ministry Committee or the Pastor.

*Celebrating the Joy of Faith*  
  
*Through Love and Service*



## HELPING HANDS FUND APPLICATION

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### RECIPIENT INFORMATION:

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

### VENDOR-WHO CHECK SHOULD BE WRITTEN OUT TO: (attach copy of invoice/bill)

Name on Invoice: \_\_\_\_\_

Account Number/Invoice Number: \_\_\_\_\_

### REQUEST:

Amount of Request: \_\_\_\_\_ Date of Request: \_\_\_\_\_

### PURPOSE: (Please explain why there is this specific need):

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### \*\*FOR SOCIAL MINISTRY COMMITTEE USE ONLY\*\*

COMMENTS: \_\_\_\_\_

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APPROVED: YES      NO

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

SIGNATURE OF COMMITTEE MEMBER: \_\_\_\_\_

If approved, please submit this form to the Church Treasurer.