Request for New Missions Support

Charity Lutheran Church Bismarck, ND

Name(s) (please list each family member with their birth date): Mailing Address: Email: Phone # (from U.S.): Name and address (or email) of your mission agency: To whom do you report? How often are you in contact with them? In what form? Name and address of church where you are a member: Who is your main contact there? What type of communication do you have with them? From where do you receive your personal, spiritual support? (i.e. local church, fellowship with other missionaries, etc.) Please give a brief overview of your current ministry.

Please give a brief, general description of each family member's daily activities.

Please share a few highlights from your min	istry this year.
What were some of the challenges you face	d this past year?
Do you expect any major changes personall [,] year?	y, with family members, or in your ministry this
What is your annual budget?	Are you currently at full support?
How often do you communicate with your s	supporters? In what form?
Do you plan to come to Bismarck, N.D., this	year and can you visit our missions committee?
How can we pray for you throughout this ye	ar? Please share 3-4 general requests.
accurately pray for you and your ministry?	erly updates to Charity Lutheran, so that we may
Thank you for your time. We appreciate you	
To be considered for support from Charity, Missions Committee, Charity Lutheran Chur	please return your completed application to: ch, 120 Aspen Ave. Bismarck, ND 58503
Email: doug.leet@charitylutheran.org	Phone: (701) 258-1228