

Benevolence Policy

Non-Members:

To qualify for assistance, a person must be at least 21 and live within a two-mile radius of the Crossroads UPC - 182 W. Vine St. | Radcliff, KY 40160. Only requests for electric, gas, fuel oil, food or medicine will be considered.

Assistance for non-members is limited to **\$25.00 per person** per calendar year. Funds are also limited by the amount of money in the Benevolence Fund. Should numerous requests come in at once, no more than half of the money in the Benevolence Fund may be spent on non-members at that time so that we may have a cushion in the event a church member has as need. All requests for help will be at the Pastors and/or Board Members discretion. All payments will be made directly with the supplier. No cash or checks will be given directly to an individual. Requests for food will be handled through our food pantry or with vouchers from a local grocer. The person requesting assistance must come to the church and fill out an application form signifying the type of assistance needed. A copy of their State ID and Social Security number must be obtained on the back of the application. If money is requested for help in getting electric power turned back on, the applicant must provide us with proof that all of that bill has been paid LESS the amount we will put toward the bill.

This policy does not guarantee that everyone who requests help will receive it.

Church Members:

Any member qualifies for assistance. The only limit on the amount we can assist is the amount in the Benevolence Fund plus the amount other members care to share. The member's involvement in church activities will be considered when making a determination about the amount of assistance that will be provided with members in good standing having preference over nominal members – sick and shut-in being excepted.

For special requests over \$100.00, the Board Members will be consulted. A special offering may be taken if deemed necessary. Requests for assistance for electric, gas, fuel oil, medical, food, rent or other payments will be considered. All requests for help will be at the Pastors and/or Board Members discretion. The member requesting assistance must fill out an application form signifying the type of assistance needed. A copy of their **State ID** and **Social Security Number** must be obtained on the back of the application. All payments will be made directly with the supplier. No cash or checks will be given directly to an individual unless approved by the Pastors and/or Board Members. Requests for food will be handled through our **food pantry** or with **vouchers** from a local grocer.

This policy does not guarantee that everyone who requests help will receive it.

Application for Benevolence Assistance

Name: _____

Address: _____

City: _____ State: KY Zip: _____

Phone Number: _____

Are you a member of the Crossroads? Yes ___ No ___

Check the box next to the area for which you are requesting assistance:

Electric ___ Natural Gas/Propane ___ Fuel Oil ___ Food ___ Medicine ___

Church members may also choose from the following:

Medical ___ Rent ___ Other _____

If you are applying for assistance with a utility (electric, gas, fuel oil), please write your account number below: _____

Sign Here: _____ Date: _____

For Office Use Only

Application Completed: ___ Yes ___ No

Assistance Given: ___ Yes ___ No

Amount: \$ _____

Date Assistance Request Fulfilled: _____
