

Application
Macedonian Loan

A Ministry of Tennessee Baptist Mission Board

I. Information on Church or Association (Borrower)

1. Legal Name: _____
Address: _____
2. Date Established: _____ Incorporated? Yes ____ No ____ If Yes, date: _____
3. Affiliated with what association? _____
4. Name of Pastor: _____ Email: _____
Address: _____
Phones: Day (____) _____ Cell: (____) _____
5. Secondary Contact: _____ Email: _____
Address: _____
Phones: Day (____) _____ Cell: (____) _____
6. Has the church applied for a loan through Paycheck Protection Program, administered by the Small Business Administration? Yes ____ No ____
If yes, how much does the church expect to receive from that loan? _____
7. As of the date of this application, what is the total amount of financial reserves held by the church?
\$ _____

II. Qualifications

8. Describe the health of the Borrower prior to March of 2020. Was it growing, holding steady, in a state of decline? What were the reasons for this state?
9. Without the disruption caused by COVID 19, why do you think that the Borrower would continue to be a viable ministry next year and in the future? What factors will contribute to the success of the Borrower several years down the road?
10. What is the pastor's and church's vision and strategy coming out of COVID 19, to regather the flock and move forward?

Application for Macedonian Loan – cont.

11. Describe the Borrower's commitment to the Tennessee Baptist Convention, the Cooperative Program, and the Golden Offering for TN Missions:

12. Identify all full-time and part-time paid staff positions at the Church as of March 1, 2020.

13. What were the total undesignated receipts for most recent fiscal year-end? \$_____

14. Indicate the actual or anticipated costs of the following items related to the full and part-time staff list above:

Expense	March 2020	April 2020	May 2020	June 2020	Total
Gross Compensation	\$	\$	\$	\$	\$
Medical Insurance	\$	\$	\$	\$	\$
Mortgage and Other Loans	\$	\$	\$	\$	\$
Property Insurance	\$	\$	\$	\$	\$
Utility Costs	\$	\$	\$	\$	\$
Other Facility Contract Costs	\$	\$	\$	\$	\$
Grand Total				\$	
50% of Grand Total: Maximum amount of loan, but no amount is guaranteed.				\$	

Please provide detail documentation on each classification of expenses on last page.

15. Affirmation: The following leader of the church represents that he or she has or will obtain proper authorization from the church to execute a promissory note on behalf of the church for the repayment of the loan within three years at 0% interest rate. After three years, the loan will be in default and interest will accrue at the rate of 5% per annum.

Signature
Print Name _____

Position in Church

Date

Submit form to: Beth Nichols, BNichols@tnbaptist.org 615-371-2043

Questions to: William F. Maxwell, WMaxwell@tnbaptist.org, 615-371-2024

Please use this page to detail the amounts reported under question 14.