

**ACCOUNTABILITY FORM
Eliza Broadus Offering Grant**

KENTUCKY WOMAN'S MISSIONARY UNION

This form is to be completed and returned with a subsequent year grant application. If not applying for a subsequent year grant, return this form when the project is completed or no later than December 15 of the year the grant was received.

Grant requests must be made annually and past funding is not a guarantee of future funding. The EBO application form is available online and must be received by December 15.

www.kywmu.org/eboapplication

Mail to: Kentucky Woman's Missionary Union
13420 Eastpoint Centre Drive
Louisville, KY 40223

KBC Association where ministry is located: _____

Name of Organization: _____

Name of person completing this form: _____

Address: _____

City, State, Zip: _____

Telephone: _____ Email: _____

Amount Received \$ _____

On the back or additional sheet, please give a detailed description of how money was spent, ministry objective, persons ministered to, and how goals were accomplished.

How many people have been saved in the past year through this ministry?

How do you connect people to local churches?

Tell the story of a person impacted by this ministry.

Share other significant information or developments this year in this ministry.

Signature _____

Date _____

Please keep a copy for your records.