

Support Raising Action Plan

Dollars and Dates:

1. Total monthly budget per month \$_____ per month
2. Total amount of monthly support currently raised: \$_____ per month
3. Total amount of monthly support still needed to raise: \$_____ per month
4. Total amount of cash (i.e. special gifts for launching fund) needed to raise: \$_____
5. Date I will start my support raising: _____
6. Date I plan on finishing my support raising and reaching at least 100%: _____
7. After getting to full support, date I expect to move to my ministry assignment: _____

Phases:

- Phase 1: To raise \$_____ monthly \$_____ cash by _____ (date)
- Phase 2: To raise \$_____ monthly \$_____ cash by _____ (date)
- Phase 3: To raise \$_____ monthly \$_____ cash by _____ (date)

| Action Summary: | By Date: | Monthly Support Anticipated: |
|------------------------------|----------|------------------------------|
| 1. | | \$ |
| 2. | | \$ |
| 3. | | \$ |
| 4. | | \$ |
| 5. | | \$ |
| 6. | | \$ |
| 7. | | \$ |
| 8. | | \$ |
| 9. | | \$ |
| 10. | | \$ |
| 11. | | \$ |
| 12. | | \$ |
| 13. | | \$ |
| 14. | | \$ |
| 15. | | \$ |
| 16. | | \$ |
| 17. | | \$ |
| (F/F = Face to Face Appeals) | | Total: \$ |

Ministry to Constituency: Mailing List Size Before Training: _____ Now: _____[illegible]