



CICERO CHRISTIAN CHURCH

1715 Stringtown Pike / Cicero, Indiana 46034 / 317.984.4653
reachteachserve.org

REQUEST FOR HOUSING ALLOWANCE DESIGNATION

For the Calendar Year: _____

Minister: _____

Estimated Housing Expense:

1. Housing Acquisition (sum of all of the following) \$ _____
 - Down payment to be made during current year _____
 - Principle payments / debt reduction (12 months) _____
 - Accelerated principle payments _____
 - Rental payments including garage rent _____
2. Interest on bonafide mortgage indebtedness directly related to providing personal residence for the minister and his / her immediate family. _____
3. Real estate taxes and other property assessments directly related to occupancy of personal residence (including sewer taxes and other revenue producing assessments on property). _____
4. Property and general liability insurance attributable to occupancy of personal residence. _____
5. Repairs, maintenance and structural improvements, grounds maintenance, pest control, etc. _____
6. Utilities including natural gas, water, electricity and cable TV but excluding telephone. _____
7. Furnishings and decorating expense and other nonstructural improvements to residence. _____
8. Other expenses listed on the reverse side of this form. _____

Total Housing Request for Current Year \$ _____

Certification that total request does not exceed fair rental value including furnishings:

The current fair rental value of my current residence including utilities and furnishings does not exceed the housing allowance requested above.

Signed _____ Date _____

Action By Church Board of Elders:

At the regularly scheduled business meeting of _____ on the date _____, 20____, the annual housing allowance requested for _____ was designated in the amount of \$ _____ for the period beginning _____. Such designated housing allowance shall remain in effect for all future years unless amended or rescinded by the church board. The designee of this allowance agrees to keep complete and accurate records of all housing expenses incurred and paid during the period in which this housing allowance designation remains in effect.

Officiating member and Title

Signed _____ Title: _____ Date _____