



E.C. Church Benefits Corporation
 100 W. Park Ave., Myerstown, PA 17067
 (717)866-7581

Manna Fund Application/Financial Disclosure Form

PLEASE PRINT LEGIBLY.

Name: _____ Date of Birth: _____

Spouse's Name: _____ Date of Birth: _____

Address: _____

INCOME FOR YEAR: _____	Member	Spouse
1. ECC Benefits Corporation	_____	_____
2. Pension from non-church related work	_____	_____
3. Pension from Military service	_____	_____
4. Pension annuity from insurance contract	_____	_____
5. Social Security: Gross _____		
Medicare Deduction _____		
Net Social Security Amount	_____	_____
6. Any other income (interest, rent, dividends, Disability payments etc.)	_____	_____
7. Current Earnings - TOTAL COMBINED INCOME (Total of Items 1-6)	_____	_____

If you own your own residence, do you have net assets (other than your personal residence) of more than \$50,000? Yes No

If you do NOT own your own residence, do you have net assets of more than \$70,000? Yes No

If you answer **YES** to either of these questions, please explain on the reverse side of this form what the assets are and the dollar value of the asset. This would include the sale of a residence if you downsized to a smaller home.)

_____ I would like to be considered for a pension supplement under the Manna Fund program.

Signature: _____ Date: _____

Please return the completed form to address at the top.