



## **SUPPORTING THE PRIESTHOOD.**

The fund is devoted to uphold and to demonstrate the love and compassion of our Lord through His people, to those men and women who served sacrificially in our churches for the work of His Kingdom.

We have now launched the COVID-19 PASTOR'S INCOME RELIEF FUND that exists to care for the priesthood, support all those in fulltime ministry and to show the compassion of the gospel by providing financial assistance to:

- Pastors in full time ministry and don't have any other source of income
- Pastors leading small churches in disadvantaged arrears, in informal settlements and villages
- Pastors serving in small churches where their salary was not sufficient to save
- Missionaries who depends solely on ministering the gospel
- Nonordained employees of the church
- Families and surviving dependents of the above

[HOME](#)[ABOUT US](#)[BECOME A MEMBER](#)[MEMBERS](#)[RELIEF FUND](#)

**STEP1:**  
**CLICK ON MY ACCOUNTS**

**MEMBERS OVERVIEW**

**MEMBERS DIRECTORY**

**MYACCOUNT**

**LOGIN**





# MY ACCOUNT

## LOGIN

STEP 2  
ENTER YOUR USERNAME  
\_PASSWORD  
CLICK LOGIN

Username or email address \*

admedia24@gmail.com

Password \*

.....

Log in

☐ Remember me

[Lost your password?](#)

 ORGANISATIONS

Settings

Home

Settings

Apply for funding

STORE SETTINGS

STEP 3  
SUBMIT VERIFICATION DOCUMENTS  
CLICK ON SETTINGS ON YOUR LEFT  
THEN VERIFICATION ON YOUR RIGHT

Verification

2% Complete!

Suggestion(s): Add Store Logo. Add Store Name. Add Store Banner. Add Store Description. Add Store Address. Add Store Location. Set your payment method.



- Social
- Membership
- Verification

Prompt Verify

### IDENTITY VERIFICATION

National ID Card

UPLOAD

Business Card

UPLOAD

Passport

UPLOAD

ID/Passport Copy

UPLOAD

Application Letter

UPLOAD

Church Registration Certificate /  
NPO Constitution

UPLOAD

Monthly Budget

UPLOAD

Proof of Bank Statement

UPLOAD

STEP 4  
UPLOAD THE REQUIRED DOCUMENTS

AFTER UPLOADING  
CLICK SAVE

Privacy & Cookies Policy

SAVE

### PROFILE MANAGER

- Personal
- Address
- Social
- Membership
- Verification

#### BILLING

STEPS  
FILL IN PERSONAL  
ADDRESS  
\_SAVE

First Name

David

Last Name

LEADERSHIP

Address 1

Address 2

Country

Choose ...