**State Financial Secretary: Shipping Requested:**

Name: 🞏 Regular

**NOTE: Please allow up to 3 weeks for regular shipping**

Phone: 🞏 Priority

E-mail: 🞏 Overnight

State FS Signature: Date Received: Date Processed:

**State: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Prison Name (per DOC) or KO City/Area Name:**

If Kairos operates in multiple yards in this facility, please provide the yard names (e.g. A, B, C or yard names) **YARDS:**

**Ministry Type:**

🞏 Kairos Inside Men

🞏 Kairos Inside Women

🞏 Kairos Outside

🞏 Kairos Torch Boys

🞏 Kairos Torch Girls

**NOTE:** Requests will cause changes in Ezra, Financials, KairosMessenger and KairosDonor.

**KairosDonor Action:**

🞏 Add Yard (New Yard in existing Council)

🞏 Close Council (Prison closed) (Explain why below)

🞏 Continuing Ministry Only (No Weekends)

🞏 Inactivate Council (Prison open but AC disbanded) (Explain why below)

🞏 New Council (New location)

🞏 Reactivate Council (Formerly Inactive)

🞏 Rename Council (Prison or KO name change)

🞏 Replacement (Explain why below)

**Explanation:**

**Enter this section if New or Reactivated**

**Advisory Council Chair:**

Name:

Address:

City/State/ Zip:

Phone:

E-mail:

**Advisory Council Vice Chair:**

Name:

Address:

City/State/ Zip:

Phone:

E-mail:

**Advisory Council Donor Coordinator or TX only - Financial Secretary:**

Name:

Address:

City/State/ Zip:

Phone:

E-mail:

**Advisory Council Secretary:**

Name:

Address:

City/State/ Zip:

Phone:

E-mail:

**Advisory Council Treasurer:**

Name:

Address:

City/State/ Zip:

Phone:

E-mail:

**For Office Use Only (KD Rev. 3/16/23)**

Official AC Name:

Sequence #:

🞏 Tech Team 🞏 MOU

🞏 Elections 🞏 Kalendar

🞏 Volunteers moved to:

🞏 AC History 🞏 Variances

🞏 Ezra 🞏 AC Tracker