**Request for Columbus Hope Rebates**

**Please refer to instructions on reverse when completing this form**

 Date:

**Council Requesting Rebates**

Number: Location:

**Knight Completing This Report**

Name: Position (i.e. FS, GK)

Phone: E-mail address:

**Please note that grant checks will be written for WHOLE DOLLAR AMOUNTS.**

**Grant Recipient**

Organization Name:

Organization’s Tax Exempt Number: $

Number of clients served with intellectual disabilities:

Are the facilities open to all regardless of race, religion, or ethnic background? Yes: No:

**Grant Recipient**

Organization Name:

Organization’s Tax Exempt Number: $

Number of clients served with intellectual disabilities:

Are the facilities open to all regardless of race, religion, or ethnic background? Yes: No:

**Grant Recipient**

Organization Name:

Organization’s Tax Exempt Number: $

Number of clients served with intellectual disabilities:

Are the facilities open to all regardless of race, religion, or ethnic background? Yes: No:

I hereby certify that the above named organizations are serving the needs of Individuals with Intellectual Disabilities:

 **\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Grand Knight Signature and Date Financial Secretary Name and Mailing Address**

Mail to Anthony Panek, CHF Secretary, 4904 Boundview Court, Summerville, SC 29485

**PLEASE:**

1. If you have any questions call Anthony Panek at 843-330-5449 or email at secretary@columbushope.org
2. Please use this form – not a homemade form or earlier version of the form. Please discard any blank copies you have in your files of previous or homemade versions of this form. If you need copies you can contact Anthony Panek and he will email one to you or send one to you in the mail. Some delays have been experienced by the use of incorrect forms.
3. Complete all blocks, if possible, and print all information (except the signature) legibly and large enough to be easily read. While not required, black or blue ink is preferred. Please don’t bother trying to type the information on the form.
4. ALL blocks in the Grant Recipient information must be completed or we cannot issue a check.
5. All grant checks must be written for even **dollar** amounts, and it is requested that the minimum routine amount for rebate checks be $500.00.
6. The Grand Knight should sign and date the form.
7. Normally, it should take no longer than 7 to 10 business days to receive your rebate checks if there are no issues with your submission.
8. The completed CHF 102 should be sent to:

Anthony Panek, CHF Secretary

4904 Boundview Court

Summerville, SC 29485