



Diocese of Rockford

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Social Services

DIOCESE OF ROCKFORD - CATHOLIC CHARITIES CRS RICE BOWL APPLICATION FOR FUNDING

Name of organization:

Address:

Telephone:

Email:

Contact person:

Telephone:

Briefly describe the need or problem your organization wants to address:

Briefly describe how you expect to use the funds and how many people would potentially benefit:

Amount of funds needed:

Amount being requested from CRS Rice Bowl:

**Please attach to this form information regarding the overall financial condition of your organization's "feeding the hungry" program.

Signature:

Date: