

## **Lay Charities Application**

## The Catholic Church of St. Monica

This application must be completed in its entirety. Incomplete applications will not be considered.

Parishioner/Charity Data				
Parishioner Name				
Year Registered at St. Monica's				
Envelope Number				
Name of Charitable Organization				
Year Granted IRS 501 (c)(3) Designation				
Is there a Board of Directors?	Yes	No	If yes, Number of Directors	
Is there full time paid staff?	Yes	No		
Mission Information				
Mission Statement				
Wission Statement				
Description of People Served				
·				
Country Served				
Charity Website				
Does Charity accept online donations?	Yes	No		
Revenue Last Fiscal Year		_ Year	\$	
Mission Expenses		_ Year	\$	
Number Served Last Fiscal Year				
List any Additional Sponsors				
List any Additional Partners				
Mission Information (The following information	n must	ha subm	sitted with this application )	
Mission Information (The following information Copy of IRS Determination Letter		be subiii	intea with this application.)	
Latest IRS 990 and/or Financial Report	$\bigcirc$			
List of Board of Directors	$\bigcirc$			
List of Board of Directors				
I attest the information provided is correct to	the best	of my k	nowledge.	
Signed			Date	