

The Community of the Blessed Sacrament - Scottsdale
Ministry for Social Action Cause Subcommittee

Date:

Recipient Name _____ Phone: _____

Address _____ City _____ State _____ Zip _____

Contact Person _____ Title _____

Email: _____ Phone _____

Recommendation Submitted by: _____

Email: _____ Phone _____

Recommended Donation (\$, items, project): _____

Include additional comments/Information about the Recipient. Please attach any other information; i.e. how money would be used; % administrative expense...

MSA Outreach Cause Committee Action:

No donation Recommended

More information is needed.

Other:

The committee recommends the following donation:

Note: Deadline annually is October 15th. MSA discernment of applications will be completed by November 30th each year.