



b) Please check the appropriate boxes for the current services you provide.

- clothing
- food:  groceries/food pantry  groceries gift cards  hot meals gift cards
- furniture
- home visits
- housing:  rent/deposit assistance  motel vouchers
- information and referral
- prayer
- special events:  Thanksgiving meal  Christmas meal  Christmas gifts
- toiletries
- transportation:  gas vouchers  bus tickets
- utilities payment assistance:  electricity  gas  water

--Please list and describe any services you provide that are not listed above, and elaborate, if you wish, on any of the services you checked above.

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c) How many people (unduplicated) do you serve each year? \_\_\_\_\_

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**2. FINANCIAL INFORMATION**

Please fill out the following financial information fields. If you need assistance with filling out this section, please contact the CRS Diocesan Coordinator at (510) 768-3176 or [mmckimmey@cceb.org](mailto:mmckimmey@cceb.org).

a. Financial Overview

	Fiscal 2019 (Actual)	Fiscal 2020 (Estimated)
Organization’s total income (not including in-kind donations)	\$	\$
Percent of income from Federal support	%	%
Percent of income from State support	%	%
Percent of income from Parish collections	%	%
Percent of income from Individual donations	%	%
Percent of income from other sources (not including in-kind donations)*	%	%
Percent of income spent on food	%	%
Percent of income spent on salaries	%	%

\* Describe “other sources” of income  Not Applicable

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b. In-kind Donations (food and supplies)\*

	Fiscal 2018 (Actual)	Fiscal 2019 (Estimated)
Estimated value of in-kind donations	\$	\$

\*Describe what in-kind donations you receive.  Not Applicable

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**3. Do you expect cutbacks of any sort in the next 12 months? \_\_\_\_\_ If yes, please explain:**

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**4. How will Rice Bowl funds be used? Please be specific. \_\_\_\_\_**

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5. How will the Catholic Relief Services Rice Bowl program be highlighted or noted as a (co)funder of this project?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

6. How did your organization/parish hear about the Rice Bowl grants? \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

7. List two persons or organizations, independent of your program, which could provide information regarding your efforts.

Name: \_\_\_\_\_ Name: \_\_\_\_\_

Daytime Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Daytime Phone: (\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_

Email: \_\_\_\_\_ Email: \_\_\_\_\_

Signature of Applicant: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Name (Please print.): \_\_\_\_\_ Title: \_\_\_\_\_

The signature of the pastor, or the appropriate parish staff person, is required on the application indicating his/her knowledge and approval of the grant application.

Parish: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

Signature: \_\_\_\_\_ Printed Name: \_\_\_\_\_

**DEADLINE: Delivered, Postmarked or E-Mailed by Tuesday, September 15, 2020**

*Please Mail To:*  
CRS Rice Bowl Grant  
Catholic Relief Services  
433 Jefferson Street  
Oakland, CA 94607-3592

*Please E-Mail To:*  
[CRSRiceBowlEastBay@cceb.org](mailto:CRSRiceBowlEastBay@cceb.org)