



Ladies Ancient Order of Hibernians, Inc. National Board Application for Appeals for Aid 2024 - One-Time Grant

Appeals for Aid are intended to provide limited aid to charities at the National Convention. All appeals for aid requests must come from organizations as defined by the Ladies Ancient Order of Hibernians (LAOH) Constitution and submitted to the Missions & Charities Officer 45 days prior to the Convention. The Missions & Charities & Appeals for Aid Committees will bring these recommendations to the National Convention delegates for approval.

PLEASE PRINT ALL INFORMATION REQUESTED (Incomplete forms will not be considered)

Name of the LAOH Entity Making the Application:

The mailing address of the LAOH Entity Making the Application:

Name, Title, Phone Number, and Email Address of LAOH Contact Person:

Legal Name of Charity and Employers ID Number

If applicable, Charity known by another name

Date Charity Established

Charity Website:

Indicate Type of Organization: (Please Check All that Apply):

- | | |
|--|--|
| <input type="checkbox"/> Section 501c3 | <input type="checkbox"/> National Charity |
| <input type="checkbox"/> Christian Based | <input type="checkbox"/> Catholic Diocese |
| <input type="checkbox"/> Non-Denominational | <input type="checkbox"/> Associated with a Catholic Parish |
| <input type="checkbox"/> Community Charity (Local) | <input type="checkbox"/> State Entity |
| <input type="checkbox"/> County Entity | <input type="checkbox"/> City Entity |

Does the Charity perform or support anything against the teaching of the Catholic Church?

YES NO If yes, please explain.

Do your members volunteer at this charity? YES NO

If yes, answer the following:

1. Provide the Charities Name and Site Location
2. How will your organization continue to support this charity in the future?



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Attach Copies of the following documents for the Charity being submitted:

Governing Documents/By-Laws: YES NO

Marketing Materials(print or electronic): YES NO

Please indicate/explain below why documents were not provided:

Explain Charity in a brief paragraph; include their Mission Statement:

Explain the main sources of income for this charity:

In a short paragraph (3-5 sentences) explain how the persons served or the project being proposed by this charity will benefit from a one-time Appeals for Aid Grant.

Please specify a specific dollar amount being requested \$

Has your LAOH entity requested this charity for the Appeals for Aid Grant in the past? YES NO
If yes, when and how much?

Has this Charity received the Appeals for Aid Grant from the LAOH National Board? YES NO
If yes, when and how much?

Signature of LAOH Member: _____ Title: _____ Date: _____