

**NSS Matching Funds Program  
Assembly/Region  
Verification of Charitable**



Our Assembly/Circle/Region # \_\_\_\_\_ will be conducting a fundraising project for the benefit of (name of charity) \_\_\_\_\_ located at (address) \_\_\_\_\_ Phone \_\_\_\_\_ (name of charity officer) \_\_\_\_\_

This fund drive will begin on \_\_\_\_\_ and end on \_\_\_\_\_ It is anticipated to raise \$ \_\_\_\_\_ which will be matched by the NSS on the basis of the formula as adopted by the National Assembly and outlined in the Matching Funds Guidelines. Our Assembly/Circle/Region agrees to abide by the rules and regulations relative to this NSS Matching Funds Program in order to qualify of our grant.

***Approval and Validation of NSS Matching Funds Project by Charitable Entity***

We, (name of charity) \_\_\_\_\_ located at (address) \_\_\_\_\_ hereby acknowledge that we are aware of any grant approval to Assembly/Circle/Region \_\_\_\_\_ to assist our organization in the above fundraising project. Further, the name of our charitable entity may be used in any and all approved advertising or solicitation of funds on our behalf. With this signature we also verify that this charitable event above has concluded and we have received the donation as indicated below.

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Charitable Organization Officer

Phone \_\_\_\_\_

**Important: Please keep this form until the conclusion of the event. Include all required signatures.**

***Acknowledgement of Conclusion of NSS Matching Funds Project by Assembly/Circle/Region***

We, Assembly/Circle/Region # \_\_\_\_\_ have conducted our fundraising project for the benefit of \_\_\_\_\_ The fund drive began on \_\_\_\_\_, ended on \_\_\_\_\_ and raised \$ \_\_\_\_\_.

**For a Region Event**, list each Assembly that had representation at this event

\_\_\_\_\_

We request the match of funds, up to **\$500.00**, be made by the National Slovak Society as indicated below

Please mail check to: \_\_\_\_\_ the Charity indicated above

\_\_\_\_\_ the Assembly/Circle/Region officer for formal presentation

Date \_\_\_\_\_

\_\_\_\_\_  
Signature of Assembly/Circle/Region Officer