

GRANTEE CERTIFICATION TO THE CATHOLIC DIOCESE OF WICHITA

Date

Mr. Michael Wescott
Director of Development and Planned Giving
Catholic Diocese of Wichita
424 N. Broadway
Wichita, KS 67202

Dear Mr. Wescott,

On behalf of _____(XYZ Ministries), I acknowledge and accept a grant in the amount of \$_____ from the _____ Donor Advised Fund of the Catholic Diocese of Wichita.

XYZ Ministries certifies to the Catholic Diocese of Wichita that:

1. XYZ Ministries qualifies as a tax-exempt organization under Internal Revenue Code Section 501(c)(3), or is a governmental organization, and is not a private foundation.
2. No good or services were, or will be, directly or indirectly provided to _____(name of donor(s)/advisor(s) of the Donor Advised Fund) or members of his/her/their family or any related entity
3. Acceptance of this grant does not represent the payment of any personal pledge or other financial obligation of any person.
4. This grant will be used exclusively for charitable purposes.
5. If XYZ Ministries becomes aware of circumstances which make many of the foregoing certifications untrue, it will immediate notify the Diocese of such circumstances in writing to determine disposition of this gift.

Signature

Title

Date