Acknowledgment Form
Local Hunger Projects Holston Presbytery

Please return to: EIHN c/o Holston Presbytery
1415 Waverly Road, Kingsport TN 37764

Office Use Only
Date Received

This form is to be completed by a representative of the organization that utilized the funds.

Date: ___/___/____

Name of Church / Institution that applied for the grant: _____

Name of Project / Recipient: _____

The purpose of the acknowledgment form is to allow the committee to share your story with the people that make these funds possible. Please provide a brief description of how the grant funds were used.

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Contact Information	
Church Representative: _____ Daytime Phone Number: (____) _____ -- _____ Evening Phone Number: (____) _____ -- _____ Address: _____ _____ Email Address: _____	Recipient Representative: _____ Daytime Phone Number: (____) _____ -- _____ Evening Phone Number: (____) _____ -- _____ Address: _____ _____ Email Address: _____

Revised May 2005