



## **2025-2026 Local Grant Agreement**

Catholic Campaign for Human Development (CCHD), Diocese of Cleveland

Organization:	Project Name:
FIN #:	Contact Person:
E-Mail:	Telephone:

### **Fiscal Agent Information (if applicable)**

Fiscal Agent:	FIN #:
Contact Person:	Telephone:
E-Mail:	Website:

### **Terms and Conditions of Grant**

1. Grant funds are to be used only for the explicit purpose described in the proposal. Significant changes in the project require written notification to the Diocesan CCHD office or the return of earmarked funds.
2. CCHD grant funds shall be used in compliance with the principles of Catholic Moral and Social Teaching as established by the Diocese of Cleveland CCHD Protocol (promulgated on 3/17/09.)\* The organization and project acknowledges adherence to Catholic Moral and Social Teaching regardless of religious affiliation.
3. The project and organization shall not be engaged in partisan political activity.
4. **CCHD Annual Project Evaluation form must be completed by June 30, 2026. (The form will be sent to you in March 2026)**
5. The project shall support and promote the mission of CCHD by addressing the root causes of poverty and working for the common good.
6. CCHD funding support will be acknowledged in agency press releases and community relations efforts. CCHD logo will be included on project materials.\*
7. The CCHD National Collection marketing efforts will be supported by your project and organization. Jon Gromek, CCHD Diocesan Director, may contact you to discuss participation possibilities. (Some examples: displaying appeal posters, distributing literature, writing letters to local pastors, presenting at parishes.)\*
8. If your organization is not a 501c3, then you must use a fiscal agent. Please provide a written letter from the fiscal agent including acknowledgement of responsibility for the disbursement and accounting of grant funds for your project and the fiscal agent's federal identification number.

On behalf of the grantee agency I am authorized to accept the terms and conditions of this grant agreement and agree that failure to comply with these terms and conditions may result in recovery, suspension, and/or termination of funds.

Print Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

**Agreement must be signed and returned to CCHD Diocesan Director before the award can be processed to the address above or scan and email to Jason Lewis, [jason.lewis@ccdoble.org](mailto:jason.lewis@ccdoble.org)**