



**Nomination Form**

**GREAT FRIENDS of CAHS Alumni Who Need Our HELP !**

**Nominating Person** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**Nominee** \_\_\_\_\_

**CAHS Class ( Nominee )or Relatives Class** \_\_\_\_\_

**Contact info of Nominating Person:**

**Address** \_\_\_\_\_ **State** \_\_\_\_\_ **Zip** \_\_\_\_\_

**Email** \_\_\_\_\_ **Phone** \_\_\_\_\_ **Cell** \_\_\_\_\_

**Reason HELP is Needed ( Try and be general but provide some detail):**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**GOODS & SERVICES PAYEE(S)** \_\_\_\_\_

**Address** \_\_\_\_\_ **State** \_\_\_\_\_ **ZIP** \_\_\_\_\_

**Contact** \_\_\_\_\_ **phone** \_\_\_\_\_

**Please be advised we operate our disbursements under IRS Rules for 501c3 Non-Profit ,and can only make checks payable for Goods or Services for Nominee. We are not allowed to issue checks to individuals.**

**For any Further Information Contact Dan Kravetz,(412)-605-2337 or Denise Gipson (412)-216-1972**