

Cares for Cancer, Inc.
PO Box 502
Hankinson, ND 58041



Granting Committee
caresforcancer@yahoo.com
(701) 403-9509

Request for Benefit Grant

Organization Requesting Grant: _____

Individual Requesting For: _____

Date of Benefit: _____

(Please attach Benefit Flyer)

When completed please mail this along with the flier to Cares for Cancer PO Box 124 Hankinson ND 58041 or email to caresforcancer@yahoo.com

Guidelines

- The grant will not exceed a \$1000.00 value.
- The request must be submitted by the 15th of the month for review. At that time the Granting Committee will review your request.
- Any benefit being held within 40 miles of Hankinson, ND to assist an individual or family with their medical expenses.

Mission Statement

Making a difference by helping others meet their medical needs with compassion because we CARE.