NOMINATOR: _____

ADDRESS: _____
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PHONE: _____

EMAIL: _____

ORGANIZATION AFFILIATION: _____
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ORGANIZATION NAME: _____

ADDRESS: _____

PHONE: _____

EMAIL: _____

WEBSITE: _____

TAX ID: _____

ORGANIZATION HISTORY: _____

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MISSION STATEMENT: _____

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AWARDS ACHIEVED BY ORGANIZATION: _____

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IS IT A REGISTERED 501 CHARITY? YES NO

WHY IS THIS ORGANIZATION DESERVING OF THE SPIRIT OF HUMANITY AWARD?

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WHAT ARE THE ORGANIZATION'S GREATEST NEEDS?

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