



Dear Potential Fund Sponsor,

All Seasons Chalice (ASC) understands that you are interested in being a sponsor for a Healing Fund for a friend in need. The Board of Directors of All Seasons Chalice is interested in learning more about your request and the person(s) who would receive this support. We are happy to assist you in this inquiry and want to lay all of the details out for you as you contemplate this decision.

First, each fund must have an ASC member-sponsor. Thus we need to be sure your membership is current. If you are not current you may either renew your membership or recruit a member to the position of fund sponsor.

Second, Healing Fund donations are made to a general pool of funds whose purpose is to pay for expenses associated with the treatment of disease and alleviation of suffering. As such, all donations made to this fund will be distributed in the manner most fitting, prioritizing the person on whose behalf they were made as appropriate.

Third, Healing Fund donations may only be used to offset expenses associated with the treatment of disease and alleviation of suffering and cannot be used to purchase capital goods or other items unrelated to medical treatment required. The purchase of medical devices such as crutches, wheel chairs, rehabilitation equipment and the like are permitted. Before any monies can be distributed from the funds, ASC must receive invoices, receipts, etc. with the amount of payment requested. We will happily pay providers directly. Conversely, we can reimburse healing fund recipients with appropriate "services paid" documentation (e.g. medical invoices and a companion cancelled check or credit card statement).

Finally, we need to acquire answers to the following general questions. You are welcome to respond via email or in writing, please use more space that is provided here for your answers.

1. What person(s) is the fund intended to serve? How is the person(s) in need of support funds to assist with the treatment of disease and alleviation of suffering, please be very detailed?
2. How many potential contributors (donors) are there to this fund in your estimation?

3. For what length of time is this fund's need anticipated?
  
4. What is the total dollar amount estimated need for this fund and its recipient?  
Please note: all donations received will be deposited into the fund minus a 5% administrative fee which is collected to pay for our administrative costs.
  
5. Who will be the responsible party for this fund? Someone from our current ASC membership body must act as the Member Sponsor for this fund, who will this be? In addition to acting as a primary point of contact, the responsible party is required to send a personal letter (by Dec 31<sup>st</sup> of each year) attesting that all funds received during the year were used to pay for the treatment costs and/or alleviation of suffering for the fund recipient(s). This letter does not have to be an itemized accounting, rather a personal statement of the specific use of the funds in general categorical terms.

Sincerely,



Mary Lynn Neiman  
Administrative Director, ASC