

## **District Grant Final Report D5495**

**for District Grants completed in Rotary year 2018-19**

**Due April 30, 2019.** Please type all answers. Sign, scan and upload to the project website with accompanying **paid receipts:** [www.matchinggrants.org](http://www.matchinggrants.org) DO NOT UPLOAD cancelled checks, bank statements or invoices (unless marked PAID),

Project Number: 2377 Project Title: Hope Women's Center

Rotary Club: Phoenix Camelback Rotary Club #1214

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Project Description. What was done in 110 words or less?

**Hope Women's Center serves underprivileged moms to be and new moms and improves the health of the infants and moms. Our club provided funding and volunteered assistance to provide food, clothing, bus passes, diapers and toiletries to moms and infants in need.**

When (dates) and where (city and state) did the project take place?

**The project took place in Phoenix, Arizona in December 2018, April 2019 and May 2019.**

Who were the beneficiaries?

**Underprivileged moms and mom to be and their children.**

How many Rotarians participated in this project?

**Approximately 10 Rotarians participated.**

What did the Rotarians do? Give at least two examples.

**Club Members toured the facilities of Hope Women’s Center and interviewed their manager to assure the funds would be put to proper uses.**

How many non-Rotarians benefited from this project?

**All the new moms and moms to be and their children who are being helped by Hope Women’s Center were non-Rotarians.**

If a cooperating organization was used, what was it’s role?

**District Grant Final Report D5495 for District Grants completed in Rotary year 2018-19**

Project number: 2377

Financial Report: *(Use second page, if needed. District must receive receipts of all expenditures.)*

1. Income      Amount

1. District Grant funds received from the District	\$1,000
2. Club funds	\$1,000
3. Other funding (specify)	
4. Other funding (specify)	
<b>Total Project Income</b>	<b>\$2,000</b>

2. Expenditures (please be specific and add lines as needed)

1. Bus Passes	\$672.50
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2. Grocery Cards	\$1,127.50
3. Diaper Bank	\$200.00
4.	
5.	
6.	
<b>Total Project Expenditures</b>	<b>\$2,000.00</b>

By signing this report, I confirm that to the best of my knowledge these District Grant funds were spent only for eligible items in accordance with Trustee-approved guidelines, and that all of the information contained herein is true and accurate. **Receipts for all grant-funded expenditures have been uploaded to the project website.** I also understand that all photographs submitted in connection with this report will become the property of RI and will not be returned.

Club President Signature: *Vic Casebolt*  
 Club President printed name: *Vic Casebolt*

Date: *5-31-19*



Dear Rotary Club Members,

Hope Women's Center is on the frontlines of the struggle to help at-risk women and teen girls find their way out of crisis. Whether faced with an unplanned pregnancy, drug/alcohol addiction, domestic and sexual abuse, homelessness, prostitution or rape, Hope Women's Center has been engaging, encouraging and equipping women and teens by providing parenting and life skills training, spiritual guidance and mentoring, materials assistance and the resources necessary to make wise decisions for the future.

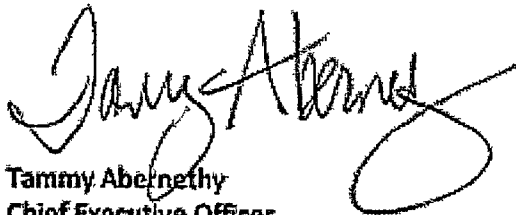
In 2018, Hope Women's Center (Phoenix, Apache Junction, Coolidge, and the West Valley) served over 1,500 women and 300 children in more than 40,000 opportunities to provide services to with education classes, mentoring, support groups, community referrals, and material assistance. Our classes are taught and developed by volunteers who are interested in building meaningful relationships with our clients, as well as sharing skills and knowledge.

As Hope Women's Center is a 501(c)(3) non-profit organization that operates solely on contributions from private donors, churches, civic groups, and local area businesses, your donation last year was vital to helping us provide material resources for our families. With your gift we were able to provide the following through our Center "Boutique":

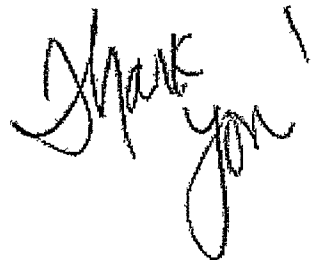
185 women with emergency bus passes (to get to the center or to a job interview, etc)  
300 women with diapers for their children (ongoing throughout the year via the Diaper Bank)  
45 women with grocery cards for food for their families

Your generosity and support are greatly appreciated! We could not serve without partners like you!

Very Sincerely,



Tammy Abernethy  
Chief Executive Officer



Thank you!

Federal Tax ID: 86-0668354

HWC-Apache Junction  
252 N. Ironwood Dr.  
Apache Junction, AZ 85120

HWC-Coolidge  
850 N. California St.  
Coolidge, AZ 85128

HWC-Phoenix  
1640 E. McDowell Road  
Phoenix, AZ 85006

HWC-Maricopa (Cooling Stone)  
45978 W. McDavid Road  
Maricopa, AZ 85139

HWC-West Valley  
12101 New Grand Ave  
Himilaga, AZ 85335

Mailing Address: 1640 E. McDowell Road, Phoenix, AZ 85006  
office@hopewomenscenter.org ~ www.hopewomenscenter.org  
Tax ID# 86-0668354

**Disposition of Funds from Rotary Gift donated 9/19/18**

Bus passes	12/12/2018	\$451.25
Grocery Cards	12/7/2018	\$2,425.00
Diaper Bank	4/2/2019	\$200.00
Bus passes	5/2/2019	\$221.25
Total		\$3,297.50
Check #1636	9/19/2018	(\$2,000.00)

\$1,297.50 → Remaining Grocery cards funded from another donor.

# Payment Confirmation

## Receipt of Payment

<b>Online Transaction Information:</b>	
Transaction Authorization Code:	012641
Total Amount Paid:	\$ 451.25
Transaction Time Stamp:	2018-12-12T182643Z
Card Type:	001
Card Number (partial):	xxxxxxxxxxxx9868

### Billing Information:

**Tammy Abernathy**

1640 E. McDowell Road  
Phoenix, AZ, 85006  
US

### Transaction Items:

Item #	Description	Payment Amt
1	Handling Charge	\$ \$1.25
2	LOCAL ALL DAY PASS (5-pack)	\$ \$20.00
3	REDUCED ALL DAY PASS (5-PACK)	\$ \$10.00

*20 day* *follow*  
*day 5*

**Thank You For Your Payment.**

Transaction Reference ID: 0a00e1cb8797d795d167a30ac110c02a9

**Disclaimer(Generic):** Please do not respond to this automated message via email. This message contains confidential information and is intended only for Tammy Abernathy.

Ivonne Bonetto <accountant@hopewomenscenter.org>  
To: Tammy Abernathy <tammy@hopewomenscenter.org>

Wed, Dec 12, 2018 at 2:08 PM

Ok. I need a good address for the Rotary Club. The check didn't have one and the address I found for them online came back as undeliverable.

(Quoted text hidden)

Ivonne Bonetto  
Bookkeeper  
(602) 715-0999

www.hopewomenscenter.org



Change the Lives of  
Women & Children  
with your 2018 Tax Credit



<https://www.hopewomenscenter.org/az-tax-credit/>



Bashas' #16  
 8425 E. McDonald Dr.  
 Scottsdale, AZ 85250  
 Store Director - Teressa White  
 480-358-4800

GIFT CERT PAPER BULK 2500.00  
 GIFT CARD DISCOUNT -75.00

BALANCE DUE 2425.00  
 VISA 42425.00  
 [ ] \*\*\*\*\*0272  
 Auth# 098842 Ref# 176963

12/07/2018 12:21:29  
 Total- US\$ 2,425.00  
 Entry Method: Chip  
 PURCHASE - 2716253  
 AUTH CODE:038842

Node: Issor  
 MID: 4200000000000000  
 TYR: 0000000000000000  
 IAD: 0601001600000000  
 TSI: 0000  
 ARC: 0000  
 TC: 5F0000000000000000  
 MID: 54982 TID: 001 000: 176963

CHANGE 0.00  
 SUB TOTAL 2425.00  
 TOTAL TAX 0.00  
 TOTAL 2425.00

YOUR SAVINGS TODAY!  
 Store Coupon 1 -75.00  
 TOTAL COUPONS 1 -75.00  
 Cashier:0501 Store: 16  
 POS:017 Transaction:0038  
 Friday, December 7, 2018 12:20 PM

SIGN UP FOR YOUR  
 PERSONAL THANK YOU!  
 VISIT WWW.BASHAS.COM  
 CLICK "PTY"

THANK YOU ARIZONA FOR YOUR  
 CONTINUED SUPPORT & PATRONAGE  
 Refund with receipt only  
 ALL GIFT CARD SALES ARE FINAL

Please read Store Instructions!!!



**BULK PAPER GIFT CERTIFICATES**  
ORDER INFORMATION / STORE INSTRUCTIONS / RECEIPT

**Order Information:**

Date of order: \_\_\_\_\_ Order sent to Store # \_\_\_\_\_  
Organization Name: \_\_\_\_\_  
Ordered by: \_\_\_\_\_ Phone Number \_\_\_\_\_

Quantity	Denomination	Amount
100	25	\$ 2500-
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

**Store Instructions:**

The customer will be making a check payable to Bashas' Inc, for the Amount Due indicated below.

Have the customer sign for the Gift Certificates in the space below.

Ring the gift certificate sale on the customer service register as follows:

Ring the Total Amount \$ (without the discount) on PLU 1839

Ring the Discount \$ on PLU 1838

Deposit the check for the Amount Due \$ along with other deposits

Send the Original Copy of this form to the Corp. Office via CB Red Bag.

Total Amount \$ 2500 - Discount \$ 75 = Amount Due \$ 2425

Other payment arrangements have been made. Please have the customer sign for the Gift Certificates below and send the Original Copy of this form to the Corp. Office via CB Red Bag.

**Notice of Receipt of Gift Certificates:**

\_\_\_\_\_  
Customer's Signature

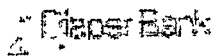
\_\_\_\_\_  
Date

\_\_\_\_\_  
Witness: Store Manager's Signature

\_\_\_\_\_  
Date

Original Copy - CB Red Bag    Pink Copy - Store    Yellow Copy - Customer





405 N 75th Ave, Suite 163 Bldg 3 - Phoenix, AZ  
Ginger@diaperbankaz.org

### Collaborative Partnership

The provision of diaper supplies is a cooperative effort between the Diaper Bank and our Partner Agencies for the 2019 calendar year. Partner Agency agrees to complete the following by the corresponding deadlines this calendar year to ensure the community can continue to receive this service and will email the Diaper Bank to notify as each item is completed, or agency will pay a penalty. Due to the extensive amount of time spent trying to track collaborative agreement expectations we are asking that you email us when each item is complete with the details. Our financial resources are extremely limited and the more money that we spend on administrative needs means the less diapers we can provide.

**Administration Fee** To be received by the Diaper Bank after application has been approved. Tier determined by Diaper Bank.

*You could use a more frequent distribution schedule if you prefer and the up front admin fee will be less than 2000 diapers*

- \$200 Tier 1 Single Distribution Typically less than 10K diapers annually.
- \$400 Tier 2 Biannual Distribution
- \$600 Tier 3 Quarterly Distribution
- \$1000 Tier 4 Quarterly Distribution

Choose at least 1 from the following:

- Volunteer at the Diaper Bank at least [ ] hours, completed before 2020.
- Provide a financial contribution of [ ], completed before 11/1/2019.
- Acknowledge & tag the Diaper Bank Facebook page with picture(s).
- Communicate about the Diaper Bank, diaper need, encourage supporters to donate dollars for diapers or hold drives for the Diaper Bank in one of your newsletters with our logo and url, completed by 11/2019.  
*Notified by email with an attached copy of the full newsletter from agency program contact email address w/message stating this item has been completed.*
- Place a link to DiaperBankAZ.org & our logo on a main page by 3/1/2019,  
*Notification must include a direct link where logo can be seen.*
- Host a diaper drive for the Diaper Bank through your agency, completed by 10/1/2019,  
*Please know that by choosing this item, these diapers are to benefit the Diaper Bank on behalf of your agreement and all diapers raised during the drive are to be counted and delivered to the Diaper Bank. The more diapers we receive and distribute the more assistance we may be able to get from grants for more diapers. For more details, please see the Partner Agency Handbook.*

Additional ideas for collaborative partnership? (beyond word of mouth) to be completed by [ ] ist

*Tell us about upcoming events! We would love to know about your events so we may attend, participate, sponsor, and/or share on social media.*

diaperbankaz.org

HOPE FOR WOMEN'S CENTER, Diaper Bank of Central Arizona  
Diaper Bank membership-Tier 1

200.00 8281

1010 Checking account 3361

200.00

TYPE: EFT/ACH/STANDARD DEPOSIT 01/15/14 09:13:34

TO: JENNIFER MULLIN [jennifermullin@hopeforwomenscenter.org](mailto:jennifermullin@hopeforwomenscenter.org)  
CC: Cecilia Vozon [cecilia@hopeforwomenscenter.org](mailto:cecilia@hopeforwomenscenter.org)

OK, Yes- we'll cut check Monday.  
(Isabel Leal Kusan)

Wendy Bonello  
Bookkeeper  
(602) 715-0999

[www.hopeforwomenscenter.org](http://www.hopeforwomenscenter.org)



Change the Lives of  
Women & Children



### Receipt of Payment

<b>Online Transaction Information:</b>	
Transaction Authorization Code:	002016
Total Amount Paid:	\$ 221.25
Transaction Time Stamp:	2019-05-02T154150Z
Card Type:	001
Card Number (partial):	xxxxxxxxxxxx9868

**Billing Information:**

**Tammy Abernethy**

1640 E. McDowell Road  
Phoenix, AZ, 85006  
US

**Transaction Items:**

Item #	Description	Payment Amt
1	Handling Charge	\$ \$1.25
2	LOCAL ALL DAY PASS (5-pack)	\$ \$20.00
3	REDUCED ALL DAY PASS (5-PACK)	\$ \$10.00

*Qty 10*  
*Qty 2*

**Thank You For Your Payment.**

Transaction Reference ID: 8a00e1cb8a68d1e3016a79345901d6d

Disclaimer(Generic): Please do not respond to this automated message via email. This message contains confidential information and is intended only for Tammy Abernethy.