

**SCHEDULE B – Part 2: Acknowledgement of Receipt of Emergency Grant**  
Protected "B" (when completed)

This is to certify that I, \_\_\_\_\_, have  
(Printed name of payee)  
received a grant from Support Our Troops (SOT) in the amount of \$\_\_\_\_\_.  
TruCash card# (last 4 digits) \_\_\_\_\_

I acknowledge that I have been briefed on the following: please initial each one.

- \_\_\_\_\_ • SOT Fund is funded solely by donations from the general public;
- \_\_\_\_\_ • Any unused portion of the grant/loan must be returned to the SOT Fund;
- \_\_\_\_\_ • If used for incidentals, I will repay;
- \_\_\_\_\_ • I have been briefed on what I can and cannot use the funds for. SOT does not cover incidentals, alcohol, cigarettes nor does it pay TD rates or mileage;
- \_\_\_\_\_ • I also acknowledge that I am responsible for providing receipts to the SOT for the funds spent within one month of the last transaction made;
- \_\_\_\_\_ • In the event that receipts are not received by the SOT, a portion or all of the funds may have to be repaid to the SOT;
- \_\_\_\_\_ • I understand that repayment of this grant may be required if it is determined that a loan would have resolved the situation; and
- \_\_\_\_\_ • Mandatory financial counselling is required, if the purpose of the grant is to address basic needs such as: food, shelter (rent, utilities), clothing etc..

Signature: \_\_\_\_\_

Dated: \_\_\_\_\_