



Improved Financial Relationship Model (IFRM)

ROMAN CATHOLIC ARCHDIOCESE OF BOSTON CENTRAL MINISTRY CATHOLIC APPEAL ABATEMENT FORM

FOR FISCAL YEAR 2021 (2020 Catholic Appeal)

Parish Name: _____ Town: _____

Parish ID # _____ Region: _____

2020 Catholic Appeal Assessment

(See parish donor report at
bostoncatholicappeal.org,
"For Parishes" tab)

Catholic Appeal Paid Pledges YTD

Amount Under Assessment

Abatement % Requested

OR Amount

Requirements to receive an abatement:

Appeal Coordinator Name: _____

Donor Goal Met: Yes No

Pastor Letter Sent: Yes No Pastor Email Sent: Yes No

Required Information:

*On the second page, please detail your reason for applying

* Fax or email budget for the current and upcoming fiscal year (required with application)

*Income statement and balance sheet for the current fiscal year to date and the prior fiscal year

PASTOR/ADMINISTRATOR

DATE

Please mail, email or fax form by December 7, 2020 to:

Mr. John E. Straub, Chancellor

Archdiocese of Boston, 66 Brooks Drive, Braintree, MA 02184

Phone: 617-746-5670 Fax: 617-779-4571

E-mail: jstraub@rcab.org

