

2018 MASONIC GRANT CHECKLIST

- a. Read ALL documents before beginning application to ensure understanding of eligibility requirements and program restrictions.
- b. Complete Application
 - i. **All** boxes must be completed.
 - ii. Areas left blank will cause the application to be ineligible for funding.
 - iii. If the question does not apply (i.e. vehicle payment, insurance or fuel when you do not own a vehicle), the area must be marked "DNA" for "Does Not Apply".
- c. Make sure you qualify for the assistance being requested.
- d. Indicate type of assistance being requested on the application.
- e. Sign application
- f. Obtain estimate from an approved vendor
- g. Additional qualifications for requests to purchase appliances
 - i. Applicants for appliances must ensure a space exists for the requested appliance without requiring alterations to existing structures (i.e cabinets, walls, doors, switches, utility outlets, drains, etc.).
 - ii. Only appliances meeting the listed specifications are eligible for purchase
 - iii. Applicants are NOT allowed to pay the difference to get a different, better, or bigger appliance than what is specified
 - iv. Applicants must furnish the vendor with a copy of the "Vendor Form for Appliances". This form must be used for all appliance estimates.
 - v. Estimate must include cost of appliance, delivery, installation, and removal of existing appliance (if applicable).
- h. Mail or deliver the (1) Application and (2) Estimate from Vendor to:

ASCOG

Attention: Ronnie Ward

P.O. Box 1670

Duncan, Oklahoma 73534-1670

In lieu of mailing or hand-delivering, the documents can also be emailed to:

ward_ro@ascog.org

Have Questions?

Call (580) 736-7970.

2018 MASONIC GRANT ELIGIBILITY REQUIREMENTS

READ ALL Documentation BEFORE filling out or applying. Any application submitted incomplete or without required documentation will be rejected.

The purpose of the Masonic Grant administered through ASCOG is to aid senior citizens who are unable to fund their necessities without assistance. This grant is intended to benefit **seniors 55 years of age or older** who live in ASCOG's eight-county service area. These counties are **Caddo, Comanche, Cotton, Grady, Jefferson, McClain, Stephens and Tillman.**

If you have received the Masonic grant in the past two (2) years, you are **NOT ELIGIBLE** for the Masonic grant this year. The Masonic Grant is primarily intended to cover gaps in the AAA's available services; applicants may be redirected to other sources of assistance as available.

This year's Masonic Grant will run from **January 1st to November 30th**. Your application must be submitted during that timeframe. Exceptional circumstances and urgent situations may receive additional consideration beyond that span depending on availability of funds.

Approval Process

Applications will be approved by the Masonic Committee. Applicants will be notified of their approval or rejection via letter. Please **do not call** regarding your application's status until you have received an approval letter and/or a phone call from ASCOG.

For additional questions regarding the Masonic Grant Assistance Program for Seniors, contact:

Ronnie Ward

Executive Director

Office: (580) 736-7970

Toll-free: (800) 658-1466 ext. 241

Senior Information Line: 1-800-211-2116

Email: ward_ro@ascog.org

Funding for this service is provided by the Masonic Charities Foundation Grant. It is the policy of ASCOG to serve all individuals who are eligible for its programs without regard to race, national origin, ancestry, color, religion, sex, age, or disability.

YOU MUST ATTACH A WRITTEN ESTIMATE FROM AN APPROVED VENDOR.

A Vendor/Provider List is attached to this application. All vendors/providers must submit appropriate W-9 forms or have them on file with ASCOG to be eligible for participation in this program. You must use a provider on the list unless your provider produces a W-9 form to be placed on ASCOG's file BEFORE you submit your application. Service providers can contact **Ronnie Ward at 580-736-7970** for specific instructions.

Services Available

Maximum amounts are included where relevant. Please note that the higher the estimate, the more it will be scrutinized.

Air Conditioning / Heating Units* <i>Maximums Listed on Appliance Addendum</i>	Eyeglasses <i>Maximum \$150</i>	Emergency Medication* <i>Maximum \$300</i>	Food Assistance* <i>*See Stipulations below</i>
Appliances* <i>Maximums Listed on Appliance Addendum</i>	Dental Work <i>Maximum \$750</i>	Limited Home Repairs* <i>Maximum \$750</i>	
Durable Medical Equipment <i>Maximum: \$750</i>	Hearing Aids <i>Maximum \$750</i>	Utility Assistance* <i>Maximum \$250</i>	

Stipulations apply for items with an asterisk (). Please see details below.*

Stipulations*

Appliances: Applicants can apply for one (1) appliance. The only exception is when both a washer and dryer is needed. Applicants must obtain estimates from listed vendors (or vendors willing to utilize a voucher system who furnish a W-9 Form to ASCOG). Pricing must include type of appliance requested, delivery, installation, and hauling costs to remove appliances to be replaced. No substitutions are allowed for these items. ASCOG reserves the right to obtain a similar appliance from another vendor if the appliance can be obtained at a lesser price. Applicants are not entitled to a specific brand or model. This program is solely based on needs.

Air Conditioning/Heating: You must own your own home or limit yourself to portable heaters and window-mounted AC units. Pricing must include delivery, installation, and hauling costs to remove appliances to be replaced. No substitutions are allowed for these items.

Emergency Medication: Limited to 30-day supply for prescription medications not covered by any other source.

Home Repairs: You must own your home. **Rent to own homes are not eligible.** You must provide two estimates from a contractor and legal proof of ownership of your home. Only **ONE** application per household is allowed for assistance with home repairs.

Utility Assistance: A copy of the utility disconnect notice including amount due must be provided. Utility assistance may only be used one time and will prevent applicant receiving assistance from this grant for the next two years.

Food Assistance: Emergency situations and extreme conditions *only*. Please contact local food banks before applying to the Masonic grant. Eligibility for home delivered meals is as follows: for ages 55-59, there is a 30-day limit and assistance will be no more than \$6 per meal. For ages 60+ on a waiting list, there is a 30-day limit and assistance will be no more than \$6 per meal.

All work must be completed and all invoices received by ASCOG no later than November 30th, 2018.

2018 MASONIC GRANT ASSISTANCE PROGRAM FOR SENIORS

ASCOG Area Agency on Aging
802 W. Main
P.O. Box 1647
Duncan, OK 73544-1647

Telephone: (580) 736-7970
Toll-Free: (800) 658-1466 Fax: (580) 252-6170
Senior Information Line: (800) 211-2116

Application for assistance begins January 1 through November 30, 2018, or until funds are exhausted.

Name: _____

Telephone (including Area Code): _____

Address: _____
Street/PO Box Apt. # City Zip County

Date of Birth: _____ Age: _____ Race (Optional): _____
Month Day Year

Total Average Monthly HOUSEHOLD Income:

Social Security: \$ _____
Pension: \$ _____
Other (identify source and amount): \$ _____

How many people live in your residence? _____

Have you or a family member ever been a member of the Masons or Eastern Star? _____

If so, who? _____

Is anyone in your household a veteran? _____

If so, who? _____

Do you have Advantage? _____

Total Average Monthly HOUSEHOLD Expenses:

Rent/Mortgage: (Circle One) \$ _____
Home insurance: \$ _____
Electric: \$ _____
Natural Gas: \$ _____
Water: \$ _____
Garbage: \$ _____
Vehicle Payment: \$ _____
Vehicle Insurance: \$ _____
Vehicle Fuel: \$ _____
Telephone: \$ _____
Cable: \$ _____
Groceries (not including items from food banks, etc.): \$ _____
Medications (not covered by Medicare, Medicaid, and/or insurance): \$ _____
Medical bills (not covered by Medicare, Medicaid, and/or insurance): \$ _____
Other (Identify): \$ _____

Alternate Contact: _____

Alternate's Phone #: _____

DESCRIBE TYPE OF ASSISTANCE REQUESTED (See list of eligible projects & approved vendors)

VENDOR'S ESTIMATE MUST BE ATTACHED!

I authorize ASCOG to release information concerning the application and assistance received to appropriate agencies, as well as to the Masonic Charity Foundation of Oklahoma for recordkeeping purposes. I recognize that this program is based on need and I certify and attest that all the information above is true and accurate under penalty of perjury for false statements.

Signature

Date

APPLIANCE ADDENDUM FOR 2018 MASONIC GRANTS

The following guidelines will be followed for Masonic Grant applications for appliances such as refrigerators, freezers, electric stoves with ovens, natural gas stoves with ovens, propane stoves with ovens, electric washing machines, electric dryers, natural gas dryers, propane dryers, window air conditioners, electric floor heaters, gas floor heaters, electric hot water heaters, natural gas hot water heaters, and propane hot water heaters. Pricing should also include costs for new appliances free from dents and dings including delivery charges, installation charges, and hauling off the appliance being replaced. These items will be purchased by ASCOG with Masonic Grant funds for qualified needy applicants through a voucher system from vendors who have a W9 form on file with ASCOG.

Cost estimates must be for comparable items meeting or exceeding the individual products listed below. The manufacturer's name, model, and description listed below are for **comparison purposes only** to ensure obtaining fair estimates. Acquisition is NOT limited by brand or model, but any substitute MUST meet or exceed specifications. Appliance must come with manufacturer's warranty for parts and labor of a minimum of 1 year. Appliances must be designed, built and engineered in USA. **The maximum that may be requested for appliances is \$750.** ASCOG reserves the right to reject any and all estimates solely at its discretion.

Applicants nor vendors will be allowed to upgrade to another model with more features or greater size. The purpose of providing grant funds to purchase an appliance is to fill a need - not a partial payment for a more expensive model. Applicants or vendors not adhering to this section may be removed from program participation eligibility for up to 2 years.

LIST OF ELIBIGILE APPLIANCES THAT CAN BE REQUESTED:

1. **REFRIGERATOR** comparable to Frigidaire Model FFTR1814QW with maximum overall capacity of 18 cubic feet
2. **FREEZER** comparable to Frigidaire Model FFFU14F2QW with maximum capacity of 13.8 cubic feet
3. **ELECTRIC RANGE** comparable to Frigidaire Model FFEF3012TW with 30" cooktop and oven with overall capacity of 4.8 cubic feet
4. **NATURAL GAS RANGE (CAPABLE OF CONVERSION TO LP)** comparable to Frigidaire Model FFGF3012TW with 30" cooktop and oven with overall capacity of 4.2 cubic feet
5. **DISHWASHER (24")** comparable to Whirlpool Model FFBD2412SW
6. **TOP-LOADING WASHING MACHINE** comparable to Whirlpool Model WTW5000D
7. **ELECTRIC DRYER** comparable to Whirlpool Model WED4616FW
 - a. Must include new semi-rigid dryer duct and power cord.

8. **NATURAL GAS DRYER (CAPABLE OF CONVERSION TO LP)** comparable to Whirlpool 7 cubic foot Model WGD481EW
 - a. Must include all necessary accessories required for connecting to natural gas or LP (only if outlet is available where unit is to be installed)
 - b. Must include new semi-rigid dryer duct
9. **WINDOW AIR CONDITIONER (115 V)** comparable to Frigidaire Air Conditioner Model FFRE15L3S1
 - a. Must deliver minimum of 15,100 BTUs to cool down areas up to 850-sq ft.
 - b. Must include electronic controls allow thermostat to be set at variable comfort levels
10. **40 GALLON ELECTRIC HOT WATER HEATER**
 - a. Must include minimum of 5-year warranty
 - b. Must include cords and/or plugs for connections
 - c. Must include factory installed temperature and relief valve to ensure safe operation
 - d. Installation is not included; installation must be done by licensed plumber
11. **40 GALLON NATURAL GAS HOT WATER HEATER (CAPABLE OF CONVERSION TO LP)**
 - a. Must include minimum of 5-year warranty
 - b. Must include push button ignition system
 - c. Must include normal connection parts and venting
 - d. Must include factory installed temperature and relief valve to ensure safe operation
 - e. Installation is not included; installation must be done by licensed plumber
12. Items not listed may be requested and will be considered on a case by case basis.

MASONIC VENDOR LIST - 2018

	Vendor Name	Address	City	State	Zip	Phone
AIR CONDITIONING	Davis Air Conditioning, LLC	335 S. 81 Hwy.	Duncan	Oklahoma	73533	580-252-1787
APPLIANCES	Central Appliance	102 E Central Blvd	Anadarko	Oklahoma	73005	(405) 247-7575
	Joe's Home Appliance Corporation	418 West Grand Ave	Chickasha	Oklahoma	73018	
	J and J Appliance	4321 N Hwy 81	Duncan	Oklahoma	73533	580-475-0155
	Rains Furniture, TV & Appliance	3322 SW 11th Street	Lawton	Oklahoma	73501	580-355-5395
CONSTRUCTION	Ahtone Const	160 62 CR 1380	Anadarko	Oklahoma	73005	
	Chisholm Mills Construction	180621 N 2810 Road	Comanche	Oklahoma	73529	
	Fortney Construction	Route 3, Box 68	Duncan	Oklahoma	73533	(580) 467-1577
	Molina Concrete Const.	206 South 3rd	Duncan	Oklahoma	73533	
	Straightline Construction LLC	380 West Fuller	Duncan	Oklahoma	73533	580-560-0029
	Kevin Turpin Construction LLC	P O Box 156	Elgin	Oklahoma	73538	580-512-5698
	Houston Construction	505 West Field St.	Grandfield	Oklahoma	73546	
	Aura Construction Remodeling & Roofing	2306 NW 38th Pl	Lawton	Oklahoma	73505	580-280-9225
	Pizano Construction & More	3409 S. High Ave.	Oklahoma City	Oklahoma	73129	405-664-4014
DENTISTS	Anadarko Denture Clinic	21141 County Road 1310	Anadarko	Oklahoma	73005	405-247-9848
	John C. Phillips III, DDS, PC	2900 West Grand Ave	Chickasha	Oklahoma	73018	405-222-0222
	Mark E Mettry DDS Inc	839 West Country Club Rd	Chickasha	Oklahoma	73018	
	Melton Dental Lab	309 E Freeman	Davis	Oklahoma	73030	
	Jay Lynn White D.D.S.	1502 West Main	Duncan	Oklahoma	73533	580-252-9422
	My Dentist - Duncan	1408 N Hwy 81	Duncan	Oklahoma	73533-1722	580-252-2056
	Rodney Nelson, DDS	1501 F Brookwood	Duncan	Oklahoma	73533	580-252-2111
	Steven W. Gregg, DDS	1022 W. Main PO Box 1046	Duncan	Oklahoma	73534-1046	580-252-5480
	T. JoAnn Dillard DDS	1415 West Main	Duncan	Oklahoma	73533	
	Advanced Family Dentistry	10587 Highway 76 P O Box 728	Healdton	Oklahoma	73438	
	Hinton Family Dental	1902 N Broadway	Hinton	Oklahoma	73047	
	David J. Harrell DDS, Inc.	Wolf Creek Center 4417 West Gore, Ste. 10	Lawton	Oklahoma	73505	580-248-7333
	George I Bridges, DDS, Inc.	4006 NW Cache Road	Lawton	Oklahoma	73505-3634	580-355-0344
	Live Oak Oral Surgery	5405 SW Daun Drive	Lawton	Oklahoma	73505	
	My Dentist - Lawton	2111 NW Cache Road	Lawton	Oklahoma	73505-5213	
	Robert L. Miracle, D.M.D., P.C.	1810 NW Ferris	Lawton	Oklahoma	73507	580-355-1314
	Trace Bridges Family Dentistry	2928 NW Cache Rd	Lawton	Oklahoma	73505	
	William Carter Jr., DDS	6740 NW Cache Rd., Ste. A	Lawton	Oklahoma	73505	508-357-4943
	Nocona Dental Partners, PLLC	108 E Walnut	Nocona	Texas	76255	
	Dentures & Dental Services	2209 W I-240 Service Rd., Ste. 315	Oklahoma City	Oklahoma	73159	405-688-2500
	OU School of Dentistry	1201 N. Stonewall DCSB 206	Oklahoma City	Oklahoma	73117	405-271-4079
	Glenn A. Mead DDS	129 N 3rd St, Ste B	Purcell	Oklahoma	73080	
	Aspen Dental	P O Box 3189	Syracuse	New York	13220	
	Richard E. Chiles, Jr. DDS	116 W. Broadway Ave.	Waurika	Oklahoma	73573-2212	
	DDS Dentures & Implant Solutions	3916 Call Field Rd Ste 600	Wichita Falls	Texas	76308	(940) 217-6000
	John Knowles, DDS, P.A.	2925 Southwest Parkway	Wichita Falls	Texas	76308	940-488-4303
	Denture Services/Anadarko Denture Clinic	2101 Birchcreek Ave	Yukon	Oklahoma	73099	

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	Vendor Name	Address	City	State	Zip	Phone
ELECTRICIANS	Yancy Electric	P O Box 1413	Duncan	Oklahoma	73534	(580) 255-0944
EYEGLASSES	Anadarko Optical	216 W. Central Blvd.	Anadarko	Oklahoma	73005	
	Dr Donald C Rice Optometrist Inc	1320 W Main St	Duncan	Oklahoma	73533	
	Duncan Family Eye Care Inc.	2204 N. Hwy 81	Duncan	Oklahoma	73533	580-255-9717
	Optometry Clinic, Inc.	2120 West Elk Ave Suite 1	Duncan	Oklahoma	73533	
	Dr. Robert D. Head and Dr. Jennifer L. Head LLC	1302 SW C Avenue	Lawton	Oklahoma	73501	580-355-1298
	Eye Care on Gore	1415 W Gore Blvd	Lawton	Oklahoma	73501	
	Eyemart Express	3414 NW Cache Rd Suite 4	Lawton	Oklahoma	73505	580-353-1700
	Richard S. Swales, Vision Source	2518 West Gore Blvd.	Lawton	Oklahoma	73505	
	Young Optical Center	Young Eye Institute 4214 S.W. Lee Blvd.	Lawton	Oklahoma	73505	580-353-5860
	Hayley Eye Clinic, P.C.	1901 Kemp Blvd	Wichita Falls	Texas	76309-3959	940-723-2020
HEARING AIDS	Chickasha Hearing Center	2201 W. Iowa, Ste. 5	Chickasha	Oklahoma	73018	405-222-4444
	Audiology & Hearing Aid of Duncan Inc.	1206 N. Highway 81, Ste. 26B	Duncan	Oklahoma	73533	580-252-9005
	Altus Hearing Aid Center (Hear Gear LLC)	P O Box 451	Elk City	Oklahoma	73648	
	Elk City Hearing Aid Center (Hear Gear LLC)	P O Box 451	Elk City	Oklahoma	73648	
	Weatherford Hearing Aid Center (Hear Gear LLC)	P O Box 451	Elk City	Oklahoma	73648	
	Advanced Hearing Aids & Audiology Associates	5402 SW Lee Blvd.	Lawton	Oklahoma	73505	(580) 536-6122
LIFT CHAIRS	Central Appliance	102 E Central Blvd	Anadarko	Oklahoma	73005	(405) 247-7575
	Crown Home Furnishing	119 S. Broadway	Marlow	Oklahoma	73055	580-641-2366
	Flinn Furniture Company	PO Box 312	Marlow	Oklahoma	73055	580-658-3459
MATERIALS	Great Plains Glass	212 West Main	Anadarko	Oklahoma	73005	405-247-3541
	Marlow Lumber Co., Inc.	102 West Main PO Box 311	Marlow	Oklahoma	73055	580-658-5451
	Harris Hardware & General Store,LLC	211 W. Main/654 CR 1150	Minco	Oklahoma	73059	
MEDICAL	Service Master Medical, L.L.C.	2101 W. Iowa Ave.	Chickasha	Oklahoma	73018	405-222-4411
	Southern Plains Medical Center, Inc.	2222 W. Iowa Ave	Chickasha	Oklahoma	73038	
	Western Medical Equipment #2	3120 Hayes	Clinton	Oklahoma	73601	
	Advanced Medical Supply, LLC	2045 W Elk Ave	Duncan	Oklahoma	73533-1641	580-252-4700
	Family Medical Supply	P O Box 310	Kingston	Oklahoma	73439	
	Allergy Ear Nose and Throat Institute	4920 SW Lee Blvd	Lawton	Oklahoma	73505	
	Comanche County Memorial Hospital	3401 West Gore Blvd	Lawton	Oklahoma	73505	
	Kingdom Medical Equipment, LLC	1824 NW 52nd St.	Lawton	Oklahoma	73505	
	Lawton Brace & Limb Co., Inc.	2724 West Gore Boulevard	Lawton	Oklahoma	73505	580-353-5525
	Lawton Medi-Equip	3401West Gore Blvd	Lawton	Oklahoma	73505	580-355-7655
	Innovative Medical Supply LLC	1501 SE 4th St, Ste. D	Moore	Oklahoma	73160	405-799-8855
	Celerity Prosthetics, LLC	8625 S. Walker Ave.	Oklahoma City	Oklahoma	73139	405-605-3030
	Variety Care Inc.	3000 N. Grand Blvd.	Oklahoma City	Oklahoma	73107	4056326688, ext. 16104
	Tecumseh Lab	621 N Broadway	Tecumseh	Oklahoma	74873	
MISCELLANEOUS	Michael Lynn Dickson	908 Saratoga	Allen	Texas	75013	972-207-8253
	RW Varley Inc	508 W Chickasha Avenue	Chickasha	Oklahoma	73018	
	Chad Erick Williams	509 N. G	Duncan	Oklahoma	73533	580-736-5750
	Christopher Knabe	3960 W Seminole Rd	Duncan	Oklahoma	73533	
	Locke Supply Co.	1715 N 81 Hwy	Duncan	Oklahoma	73533	580-252-2504
	Sears Authorized Retail Dealer	3001 N Hwy 81	Duncan	Oklahoma	73533	580-252-5106
	Solutions Practice Management	2210 Duncan Regional Loop Rd.	Duncan	Oklahoma	73533	580-252-0100
	Southern Box Co.	908 West Main	Duncan	Oklahoma	73533	580-255-7866
	Southern Trophy Manufacturing Company	908 W. Main	Duncan	Oklahoma	73533	580-252-7866
	Wilson, Curtis N.	335 N. 74th St.	Duncan	Oklahoma	73533	
	Clay Anderson	1409 N. 12th	Frederick	Oklahoma	73542	
	Whites	P O Box 637	Geronimo	Oklahoma	73543	580-585-2367
	Lawrence Edward Austin	P O Box 671	Grandfield	Oklahoma	73546	
	Ronald O. Barnett	PO Box 239 22989 CR EW 185	Hollister	Oklahoma	73551	580-335-5358
	Brandon Christian	422 East J P O Box 252	Ringling	Oklahoma	73456	
	Delta Dunes, LLC	2619 Fox Drive	Tuttle	Oklahoma	73089	405-362-0144

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PEST CONTROL	Adams Termite and Pest Control, LLC	607 W. Plato Rd.	Duncan	Oklahoma	73533	
	DRS Termite & Pest Mgt	28156 CR 1150	Minco	Oklahoma	73059	405-352-4797
PHARMACY	Liberty Drug	15 West Main P O Box 362	Carnegie	Oklahoma	73015	
PHYSICIANS	David M. Huey, OD	1425 N. Main St.	Altus	Oklahoma	73521	580-477-1355
	Steven A. Gifford OD	112 Val Verde St., Ste. C	Altus	Oklahoma	73521-1190	
PLUMBING	Absolute Plumbing LLC	2783 County Street 2768	Cement	Oklahoma	73017	
	Chasteen Plumbing LLC	203 W Main	Duncan	Oklahoma	73533	580-255-0625
	Dismuke Plumbing	1707 West Main	Duncan	Oklahoma	73533	
	Punneo Plumbing Company	3960 Country Estates Lane	Duncan	Oklahoma	73533-8767	580-252-4631
PROPANE	MFA Propane	P O Box 2075	Duncan	Oklahoma	73534	(918) 214-1664
	Miller Bros. Propane	800 SW 4th St.	Weatherford	Oklahoma	73096	
ROOFING	Arrowhead Roofing	1314 Kell Blvd	Wichita Falls	Texas	76301	
	Charlie Clark's Roofing	25366 190th	Purcell	Oklahoma	73080	405-527-9325
WELDING	Charlie's Welding	401 Hickory	Comanche	Oklahoma	73529	

2018 ASCOG MASONIC GRANT VENDOR FORM FOR APPLIANCES

Any Applicant requesting an appliance must take this form to a vendor of your choice listed on the attached approved vendor sheet plus the description of the appliance according to the instructions contained in this packet. The vendor must identify by make and model for any substitutions. Substitutions must meet or exceed the listed specifications. Vendor's must have a W-9 form on file with ASCOG and be willing to utilize a voucher system whereby a voucher will be issued to an approved grantee, the vendor provides the service or appliance, vendor has grantee sign off upon completion of service, vendor submits signed form to ASCOG, and ASCOG pays the bill up to the limit specified on the voucher. ASCOG reserves the right to reject any vendor's estimate if the same item can be purchased at a lower cost elsewhere. Before rejecting any bid, ASCOG will obtain at least 2 other estimates. The lowest and best estimate will be selected if it does not exceed the maximum grant allocation of \$750.00. All estimates must include the item specified, delivery, installation, and removal of item to be replaced.

THIS IS AN ESTIMATE ONLY – No work or payment is authorized until Vendor receives a Voucher from ASCOG.

Grant Applicant's Name: _____

Grant Applicant's Address: _____

Grant Applicant's Phone Number: _____

Vendor's Name: _____

Vendor's Mailing Address: _____

Vendor's Telephone Number: _____

Name of Vendor's Contact Representative: _____

Contact's Phone Number: _____

Cost Breakdown	Estimated Cost
Appliance (specify)	
Delivery	
Installation	
Replacement removal	
Taxes	
TOTAL ESTIMATE	

Vendor's Signature

Date