



Applications for Donation Individual and/or Family



Sponsoring Organization REQUIRED - or application will be returned:

Sponsoring Organization _____

Address: _____

Street or PO Box

City, State, Zip

Contact Person: _____ Phone #: _____

A letter signed by an officer of the organization stating that they will sponsor the application MUST be included with the APPLICATION

Donation Requested for:

1) Name:

Last First Middle

2) Other Member of the Household:

<i>Last name</i>	<i>First name</i>	<i>Middle</i>	<i>Relationship</i>
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3) Address:

Street or PO Box

City, State, Zip

4) Phone #:

Home Cell Work

5) Amount Requested: \$ _____

Reason for the Request - specific use of the funds:

6) Is this Individual or Family receiving any other form of assistance or aid for the above stated request (donations, insurance, etc)?

_____ Yes

_____ No

If yes, please list:

I understand that the information contained in this application is for the purpose of obtaining funding from Dakota Valley Electric Operation Round Up Inc. and that I represent and warrant that the information provided is true and correct and will continue to be true and correct until a written notice of change is provided.

I understand that Dakota Valley Electric Operation Round Up Inc. will use this information in deciding grant funding and is authorized to make all inquiries they deem necessary to verify the accuracy of this application.

Application must be signed by ultimate recipient, spouse or Power of Attorney not to be signed by the sponsoring organization.

Signature of Ultimate Recipient

Printed Name

Date

By signing this application I understand that I am agreeing that my name, the purpose of the Operation Round Up grant and the amount may be published, should this application be successful.

**Dakota Valley Electric Operation Round Up, Inc.
7296 Highway 281 / Edgeley, ND 58433
1-800-342-4671**