

## Federated Rural Electric Trust



## Application for Organization/Agency to Request Funding

Organization:	E-mail:
Address:	
Contact Person (name and title):	
Home Phone: - Work Phone: Us the organization requesting funding exempt from payme of income tax under 501[c]3 of the Internal Revenue Code?	Cell Phone:
2. A copy of financial statement(s) for the most previous year statement to this e-mail or mail to Federated detailing revenu administrative expenses and cash/assets on hand. Are the final E-mailed   Mailed	hould be provided. If that's not available, attach a e, sources of revenue, program expenditures,
3. Has this organization received funds from the Federated Ru	ral Electric Trust before?
Yes No If yes, how many times?  4a. Does this organization receive its electric bill from Federate 4b. If yes, does this group participate in Federated's Operation 5. Approximate number of individuals, families or groups serv consists of the following townships in Jackson and Martin Cou	Round Up Program?
Jackson County: LaCrosse, Weimer, Delafield, Christiania, Alba, West Heron Lak Des Moines, Wisconsin, Round Lake, Sioux Valley, Minneota, M Martin County: Westford, Nashville, Fox Lake, Fraser, Rutland, Center Creek, Ja Prairie, Lake Fremont, Lake Belt, Tenhassen, Silver Lake and Ea	liddletown and Petersburg Townships.  y, Manyaska, Rolling Green, Fairmont, Pleasant
COMPONING CO  WE MADER  LA CROSSE ARE  DELAFIELD  CHRISTNANIA  ALBA  WEST HERON LAKE  BELMONT ENTERPRISE  FOX LAKE FRASER  FOX LAKE FRASER  FOX  MILICONE  SOL  MILICONE  MANYASKA  ROLLING  MANYASKA  ROLLING  ROUND LAKE  SIOUX  MINNEOTA  MIDDLE TOWN  PETERSBURG  LAKE FRASER  FOX  MANYASKA  ROLLING  MANYASKA  ROLLING  ROLLING  FREMONT  FREMONT  FREMONT  FREMONT  TENHASSED	Fill in one blank below to indicate the number served by your organization:  RUTLAND GANADA INDORNE PLEASANT PRAIRIE FAMILE  SIL VER SAST CHAIN  ARKE EAST CHAIN  TOWNS AND THE PRAIRIE FAMILES:  Groups:
6. Does this agency serve outside of Federated Rural Electric's If yes, please provide information on the number served and I	
Number served and location:	

If you need more space to answer these questions, please create a separate Word Document and attach to e-mail. Remember to include your financial statements in the attachments as well (can be PDF, TIF, JPG, Excel or links).

7. State the purpose of the organization/	agency's request. Include amount requested and specific use of funds.
8. List other sources of funding for the re	quest that's described above.
9. How are the agency's programs measu	ured for effectiveness?
10 Please list two references. May not be	e a director or employee of Federated Rural Electric or the Federated Rura
· · · · · · · · · · · · · · · · · · ·	n organization that has donated funds to your organization recently.
Donor's Name:	Phone: - Town:
Name:	Phone: - Town:
undersigned. The undersigned understands that represents and warrants that the information pro statement as continuing to be true and correct u	or the purpose of obtaining funding from Federated Rural Electric Trust on behalf of the the information provided herein is used to determine funding, and the undersigned ovided is true and complete and that Federated Rural Electric Trust may consider this ntil a written notice of change is provided. Federated Rural Electric Trust is authorized to the accuracy of the statement made herein. Federated will treat the information of this
Name or organization:	Representative:
Date: / / / Must be on or	1. Print form
Contact for more information or with ques	tions: 2. Submit application by e-mail

Contact for more information or with questions:
Federated Rural Electric Trust, PO Box 69, Jackson MN 56143-0069
507-847-3520 or 1-800-321-3520
E-mail: info@federatedrea.coop

3. E-mail financial records and statements to info@federatedrea.coop