



# Federated Rural Electric Trust

## Application for Organization/Agency to Request Funding



1. Name \_\_\_\_\_ E-mail \_\_\_\_\_

2. Address \_\_\_\_\_  
Street or PO Box, City, State and Zip Code

3. Contact person (name) \_\_\_\_\_ (title) \_\_\_\_\_

4. Phone numbers (home) \_\_\_\_\_ (work) \_\_\_\_\_

5. Is the organization requesting funding exempt from payment of income tax under 501[c] 3 of the Internal Revenue Code? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, attach a copy of the letter (Form 501[c]3 from the IRS.

6. A copy of financial statement(s) for the most previous year should be provided. If that's not available, attach a statement detailing revenue, sources of revenue, program expenditures, administrative expenses and cash/assets on hand. Financials attached? Yes \_\_\_\_\_ No \_\_\_\_\_

7. Has this organization received funds from the Federated Rural Electric Trust before? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, how many times? \_\_\_\_\_

8a. Does this organization received its electric bill from Federated? Yes \_\_\_\_\_ No \_\_\_\_\_  
b. If yes, does this group participate in Federated's Operation Round Up program? Yes \_\_\_\_\_ No \_\_\_\_\_

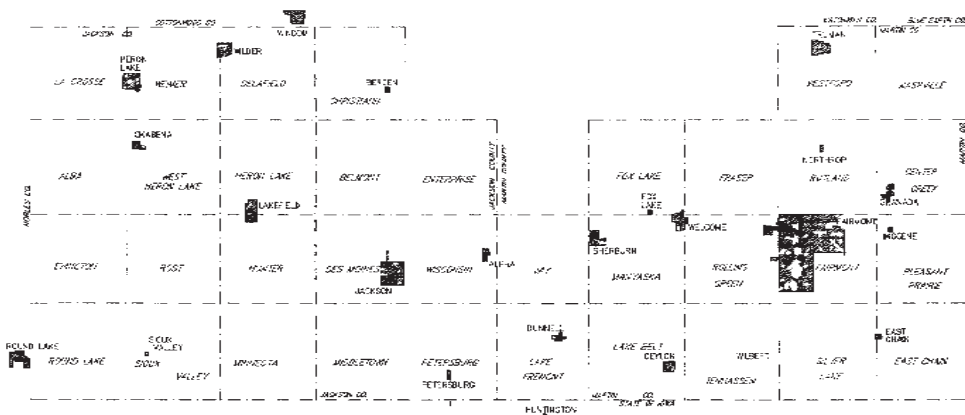
9. Approximate number of individuals, families or groups served in Federated Rural Electric's service area that consists of the following townships in Jackson and Martin Counties:

### Jackson County

LaCrosse, Weimer, Delafield, Christiania, Alba, West Heron Lake, Heron Lake, Enterprise, Ewington, Rost, Hunter, Des Moines, Wisconsin, Round Lake, Sioux Valley, Minneota, Middletown and Petersburg Townships.

### Martin County

Westford, Nashville, Fox Lake, Fraser, Rutland, Center Creek, Jay, Manyaska, Rolling Green, Fairmont, Pleasant Prairie, Lake Fremont, Lake Belt, Tenhassen, Silver Lake and East Chain Townships.



Fill in one blank below to indicate the number served by your organization:

\_\_\_\_\_ Individuals or  
\_\_\_\_\_ Families or  
\_\_\_\_\_ Groups

10. Does this agency serve outside of Federated Rural Electric's service area as defined in #9? Yes \_\_\_\_\_ No \_\_\_\_\_ If yes, please provide information on the number served and location.

\_\_\_\_\_

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11. State the purpose of the organization/agency's request. Include amount requested and specific use of funds.

12. List other sources of funding for the request that's described above.

13. How are the agency's programs measured for effectiveness?

14. Please list two references. May not be a director or employee of Federated Rural Electric or the Federated Rural Electric Trust. One reference should be an organization that has donated funds to your organization recently.

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|              |        |       |
|--------------|--------|-------|
| Donor's Name | Phone: | Town: |
|--------------|--------|-------|

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|      |        |       |
|------|--------|-------|
| Name | Phone: | Town: |
|------|--------|-------|

The information contained in this statement is for the purpose of obtaining funding from Federated Rural Electric Trust on behalf of the undersigned. The undersigned understands that the information provided herein is used to determine funding, and the undersigned represents and warrants that the information provided is true and complete and that Federated Rural Electric Trust may consider this statement as continuing to be true and correct until a written notice of change is provided. Federated Rural Electric Trust is authorized to make all inquiries they deem necessary to verify the accuracy of the statement made herein. Federated will treat the information on this application as confidential.

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|----------------------|-----------------------------|------|
| Name of Organization | Signature of Representative | Date |
|----------------------|-----------------------------|------|

**Contact for more information or with questions:**

Federated Rural Electric Trust, PO Box 69, Jackson MN 56143-0069  
507-847-3520, 728-8366 or 1-800-321-3520  
E-mail: [info@federatedrea.coop](mailto:info@federatedrea.coop)