Osage Valley Electric Community Trust PO Box 470 Butler, Missouri 64730

660-679-3131

Fax: 660-679-3142

Office Use Only Denied
Tabled
Approved

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## **APPLICATION FOR DONATION - ORGANIZATION/AGENCY**

Name of Organization
Address
Phone Number
Contact Person
Is organization requesting funding exempt from payment of income tax? Yes [ ] No [ ]
(If yes, a copy of Form 501[c]3 from Internal Revenue Service must be attached.)
A copy of financial statement(s) for most recent year should be provided.
State purpose of organization/agency request: (Include amount requested and specifics of how funds will be used; number of individuals, families or groups served who will benefit in the OVEC service area.

List other so	ources of funding for u	se of request as describe	d in the	e above:
How are ag	ency's programs meas	ured for effectiveness?		
Please list t	hree references:			
riease list t	mee references.			
	Name			Phone
	Address	City	State	Zip Code
	Name			Phone
	Address	City	State	Zip Code
	Name			Phone
	Address	City	State	Zip Code
Osage Valley I understands to each undersig complete and as continuing Valley Electric	Electric Community Trust on the information provided ned represents and warran that the Osage Valley Elect to be true and correct untiles.	ent is for the purpose of obtain n behalf of the undersigned. E ed herein is used in deciding to ts that the information provident tric Community Trust may con I a written notice of a change in trized to make all inquiries the ande herein.	Each unde o grant fu ed is true sider this is provide	ersigned unding, and e and s statement ed. The Osage
Name	of Organization			
Signa	ture of Representative			