



WHEATLAND RURAL ELECTRIC ASSOCIATION
ROUNDUP FOUNDATION
2154 SOUTH ST.
WHEATLAND, WY 82201

APPLICATION FOR DONATION INDIVIDUAL AND/OR FAMILY

1. **Name:** _____
Last First Middle

2. **Names of Other Members of Household:**

Last	First	Middle	Relationship
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

3. **Address:** _____
Street or PO Box

City or Town State Zip Code

4. **Phone Number:** _____
Home Cell

5. **Employer of those listed in No. 1 and No. 2 above:**

_____	_____
Name	Supervisor
_____	_____
Address	Phone
_____	_____
Name	Supervisor
_____	_____
Address	Phone

6. **Reason for Request of Donation:** (Circumstances or events leading to request AND planned specific use of funds.)

7. **Is the individual or family receiving any other form of assistance or aid for above stated request**
(donations, insurance, etc.)

YES

NO

If yes, please list.

8. **Please list three references.** (May not be a director or employee of Wheatland REA.)

Name		Phone	
Address		City	State Zip Code
Name		Phone	
Address		City	State Zip Code
Name		Phone	
Address		City	State Zip Code

The information contained in this statement is for the purpose of obtaining funding from the Wheatland REA Roundup Foundation on behalf of the undersigned. Each undersigned understands that the information provided herein is used in deciding to grant funding, and each undersigned represents and warrants that the information provided is true and complete and that the Wheatland REA Roundup Foundation may consider this statement as continuing to be true and correct until a written notice of a change is provided. The Wheatland REA Roundup Foundation is authorized to make all inquiries they deem necessary to verify the accuracy of the statements made herein.

*****The Wheatland REA Roundup Foundation Board generally meets on the fourth Tuesday of each month.**

Signature of Applicant/Recipient

Signature of Spouse

Date