



# WHITE RIVER VALLEY ELECTRIC TRUST

Post Office Box 969  
Branson, MO 65615  
(417) 335-9335  
FAX (417) 335-9271

Attn: Cindy Rains Operation Round Up Coordinator

## *The following application requests assistance from the White River Valley Electric Trust.*

Dear Applicant:

This Trust, Operation Round Up, is funded by co-op members who contribute to the program by having their electric bills rounded up each month to the next dollar. All of the money collected is reinvested in the community by assisting local families and organizations toward basic needs such as food, shelter, clothing and education.

- Application must be completely filled out before it will be put on the monthly agenda!
- Award recipients must reside within the White River Valley Electric Cooperative's service area. None of the award disbursement may be applied toward electric bills owed to the Cooperative.
- All monies received must go towards the organizations specified request.
- Applicants will be notified in writing as to the outcome of their request after the monthly Trust Board meeting.

Thank you for your interest in our program.

*Cindy Rains*

Cindy Rains  
Operation Round Up Coordinator



# APPLICATION FOR ASSISTANCE

Organization/Agency

Name of Organization \_\_\_\_\_

Mailing Address \_\_\_\_\_

City \_\_\_\_\_ Zip \_\_\_\_\_

County \_\_\_\_\_

Contact Person \_\_\_\_\_

Phone Number \_\_\_\_\_

Amount of request (please state specific amount). \_\_\_\_\_

Is organization requesting funding exempt from payment of income tax under IRC Section (c)(3)? Yes \_\_\_\_\_  
No \_\_\_\_\_ if yes, a copy of determination letter from Internal Revenue Service must be attached.

***A copy of financial statement for most recent year must be provided.***

List other sources of funding: \_\_\_\_\_

Number of individuals, families or groups served in Taney, Stone, Christian, Douglas or Ozark Counties in last year: \_\_\_\_\_

State purpose of Organization/Agency (include specifics of how funds will be used): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

I certify that this information is accurate and true. The White River Valley Electric Trust is authorized to make all inquiries they deem necessary to verify the accuracy of the statement made herein. I realize that any false information may result in the rejection of this application.

\_\_\_\_\_  
Name of Organization

\_\_\_\_\_  
Signature of Representative

\_\_\_\_\_  
Date

***Application must be completely filled out!***

