



BIG HORN REA
PO Box 270
Basin, WY 82410

APPLICATION FOR DONATION FOR ORGANIZATION/AGENCY

1. Name of Organization: _____

2. Address: _____

Street or PO Box

City or Town

State

Zip Code

3. Phone Number: _____

Work

Home

4. Contact Person: _____

Name

Title

5. How many people within the Big Horn REA service territory will benefit from this project and in what way? If this is an event, when and where will it be held?

6. Does organization/agency serve outside of Big Horn REA service territory?

Yes _____ No _____

If yes, please provide information on number served and location. _____

7. State the Purpose of Organization/Improvements Request: (Please include amount requested, specifics, bids and estimates of how funds will be used.) Total: \$ _____

8. List other sources of funding for use of request as described in the above: _____

9. How are agencies/organizations such as yours measured for effectiveness? _____

10. Will a representative from your organization/agency be able to attend the next board meeting and provide a presentation?

The information contained in this statement is for the purpose of obtaining funding from Big Horn REA 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 Big Horn REA may consider this statement as continuing to be true and correct until a written notice of a change is provided. Big Horn REA is authorized to make all inquiries they deem necessary to verify the accuracy of the statements made herein.

The Big Horn REA Board generally meets typically on the last Wednesday of every month of each year.

Name of Organization

Signature of Representative

Date