



NEW TOWN

STANLEY

WILLISTON

MWEC OPERATION ROUND UP®

APPLICATION FOR DONATION

pr@mwec.com

PO Box 1346, Williston ND 58802

1. Identify which Operation Round-up Program you would like to apply to:

Mountrail Cooperative Trust (project must impact Mountrail County)

Williams Cooperative Trust (project must impact Williams County)

2. Name of Organization:

3. Address:

4. Email Address:

5. Phone Number:

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6. Contact Person:

7. Is organization classified as a non-profit and/or community-based organization?

Yes

No

8. Is organization a for-profit organization?

Yes

No

9. Is organization a Mountrail-Williams Electric Cooperative Member?

Yes

No

10. A copy of financial statement(s) for most previous year should be provided.

Statement Attached

11. Number of individuals, families or groups served last year:

12. Does organization serve outside the County?

_____ Yes

_____ No

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

14. Project Summary:

15. Fund Amount Requested (include total project cost and specifics of how funds will be used.)

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16. Other funding sources (grants, donations, in-kind):

17. How are organization's programs measured for effectiveness?

18. Please upload a letter of reference (up to 3):

_____ Reference(s) Attached

The information contained in this statement is for the purpose of obtaining funding from the Operation Round Up® Program 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 Operation Round Up® Program consider this statement as continuing to be true and correct until a written notice of a change is provided.

The Operation Round Up® Program is authorized to make all inquiries they deem necessary to verify the accuracy of the statements made herein.

Name of Organization

Signature of Representative

Printed Name of Representative

Date