

RED LAKE ELECTRIC TRUST  
Post Office Box 430  
Red Lake Falls, MN 56750

**OPERATION “ROUND UP®” GRANT APPLICATION FORM**

1. Name of Organization: \_\_\_\_\_

2. Date Organized: \_\_\_\_\_

3. Address: \_\_\_\_\_

Street or Post Office Box

City or Town

State

Zip Code

4. Contact Person: \_\_\_\_\_

Name

Title

5. Phone Number: \_\_\_\_\_

Work

Home

6. What is the mission or purpose of your organization; i.e. what kind of services do you provide? \_\_\_\_\_

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

7. Is organization requesting funding exempt from payment of income tax under 501 (c)3 of the Internal Revenue Code?

Yes \_\_\_\_\_ No \_\_\_\_\_

8. A copy of financial statement(s) for most previous year should be provided. If not available attach a statement detailing revenue, sources of revenue, program expenditures, administrative expenses and cash/ assets on hand.

9. Approximate number of individuals, families or groups served in the Red Lake Electric Cooperative Cooperative service area of Pennington, Red Lake, Marshall (east half), and Polk (Parnell, Crookston, Fairfax, Kertsonville, Tilden, Grove Park, Badger, and Chester Townships).

\_\_\_\_\_ Individuals

\_\_\_\_\_ Families

\_\_\_\_\_ Groups

10. Does agency serve outside of the Red Lake Electric Cooperative service area as defined in #9?

Yes \_\_\_\_\_ No \_\_\_\_\_

Yes, please provide information on number served and location.

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\_\_\_\_\_

11. State Purpose of Organizations/Agency Request: (include amount requested and specifics of how funds will be used.

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

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

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NAME OF ORGANIZATION

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SIGNATURE OF REPRESENTATIVE

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DATE