

# Macon Electric Foundation

31571 Business Hwy. 36 E | Macon, MO | (660) 385-3157



## Application for Assistance

Dear Applicant,

This Foundation is funded by cooperative members who contribute to the program by volunteering to have their electric bills rounded up each month to the nearest dollar. All of the money collected is reinvested in the community by assisting local non-profit organizations.

- An application must be completed fully and type written before it will be added to the Foundation meeting agenda.
- Grant recipients must service individuals who reside within the Macon Electric Cooperative service area.
  - None of the award disbursement may be applied toward electric bills owed to the Cooperative.
- All monies received must go towards the organization specifically requested.
- Applicants will be notified in writing as to the outcome of their request after the quarterly Foundation board meeting.
- The maximum grant amount to be requested is \$1,000.

Thank you very much for your interest in our program!

*Allie Foster*

Allie Foster  
Marketing and Communications Manager

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## Application for Assistance

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

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_

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

City: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_

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

E-mail Address: \_\_\_\_\_

Amount of Request: \_\_\_\_\_

List sources of other funding:

Number of individuals, families, or groups served in the last year: \_\_\_\_\_

State purpose of Organization/Agency:

State reason for seeking Macon Electric Foundation Grant:

If your organization has previously received a Macon Electric Foundation Grant, provide the following information about the most recent grant received:

- Amount received: \_\_\_\_\_
- How grant funds were spent:

**\*\*Please include a copy of the organization's current financial statement, as well as proof of the organization's non-profit status.\*\***

The information contained in this statement is for the purpose of obtaining funding from the Macon Electric Foundation on behalf of the undersigned. I certify that this information is accurate and true. The Macon Electric Foundation is authorized to make all inquiries they deem necessary to verify the accuracy of the statements made herein. I realize that any false information may result in the rejection of this application.

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

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

\_\_\_\_\_  
Date