

BIG HORN REA ROUNDUP FOUNDATION PO Box 270 Basin, WY 82410

APPLICATION FOR DONATION FOR INDIVIDUAL AND/OR FAMILY

Last Other Members of Household:	First			
Other Members of Household:			Middle	
Last Name	First	Middle	Relationsh	
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D			-	
Address:		Company of the Compan		
Street or PO Box				
City or Town	State		Zip Code	
Phone Number:				
Home		Work		
Name Address	Supervis	sor		
(2) Name	Supervis	sor		
Address	Dhara			
Address	Phone			
Reason for Request for Donation: (Colanned specific use of funds.)	ircumstances or eve	nts leading t	o request AND	
namica opcomo ase or rando.				

7.	Is individual or family receiving any other form of assistance or aid for above stated request (donations, insurance, etc.)? Yes No					
	If yes, please list:					
8.	Please list three reference Rural Electric Compa	ences. (May not be a directony or Big Horn REA Roundu	or or employe op Foundation	e of Big Horn n.)		
	Name					
	Address	City	State	Zip Code		
	Name	<u> </u>				
-	Address	City	State	Zip Code		
	Name					
-	Address	City	State	Zip Code		
fund is u war RE/ and Rou	ding from the Big Horn ersigned. Each unders sed in deciding to gran rants that the information correct until a written undup Foundation is aufy the accuracy of the sexisted with the second correct.	in this statement is for the REA Roundup Foundation igned understands that the funding, and each under on provided is true and commay consider this statementice of a change is provint in the month in make all inquirestatements made herein.	n on behalf of e information signed repre- emplete and ent as continued ided. The Big ries they dee	of the in provided herein esents and that the Big Horn nuing to be true g Horn REA em necessary to erally meets the		
	oi cacii yeai.					
		Signatu	re of Applica	int/Recipient		
		Signatu	re of Spouse	9		
		Date				