



PEAR
Pioneer Electric Area Roundup

Instructions for Completing Application

1. Please type application, if possible.
2. Include a copy of your most previous year's financial statement.
3. Provide a copy of your IRS letter or form showing 501 (c) tax status.
4. If you are requesting funds to buy a specific item, please include a cost estimate in addition to a detailed description of the item.
5. Funds will not be granted for general operating expenses or utilities.
6. Mail the completed application to:

Pioneer Electric Cooperative, Inc.
Sheila Mason, PEAR Coordinator
PO BOX 368
Ulysses, KS 67880

After application has been received and reviewed by the PEAR Board of Directors, you may be contacted to appear before the Board to make a brief presentation.

Note: If you have received a previous grant, your current request is more apt to be denied or rejected if you reapply prior to the lapse of 24 months; however, applications will be considered after the lapse of 12 months.

Application for Donation

(Organization / Agency)

1. Name of Organization: _____

2. Address: _____

Street or PO Box

City

State

Zip Code

3. Contact Person: _____

4. Telephone Number: _____

Work

Home

5. Fax Number: _____

6. Email Address: _____

7. Is organization exempt from paying income tax? _____ Yes _____ No

If yes, please attach a copy of the IRS letter of Form 501 (c) to verify this distinction. **Applications will not be processed without this information.**

8. Please provide a copy of the most previous year's financial statement(s).

9. Please list the counties that this organization serves. Where possible, please breakdown the number of individuals, families or groups that this organization served last year in the following counties: Grant, Hamilton, Haskell, Kearny, Morton, Stanton, Stevens & Finney

10. Does organization serve needs outside the counties mentioned previously? If yes, provide information on the number served and locations.

11. State specific purpose of your organization's/agency's request. (Include amount requested and specific details on how funds will be used. Include cost estimates for contract work or equipment purchases.)

12. List other sources of funding you have secured to meet the above request.

13. How do you measure the effectiveness of your programs?

14. Has this organization ever received funding from PEAR?

_____ Yes _____ No

If yes, please provide an itemized statement of hw those funds were used and attach it to this application.

15. Please list three (3) business and/or personal references.

1) _____
Name Telephone

Address Zip Code

2) _____
Name Telephone

Address Zip Code

3) _____
Name Telephone

Address Zip Code

This information is for the purpose of obtaining funds from Pioneer Electric Area Roundup, Inc., on behalf of the undersigned. Each undersigned understands that information provided herein is used in deciding to disburse funds, and each undersigned represents and warrants that information provided is true and complete and that Pioneer Electric Area Roundup, Inc., may consider these statements as continuing to deem necessary to verify the accuracy of the statements made herein. Pioneer Electric Area Roundup, Inc., is authorized to make all inquiries they deem necessary to verify the accuracy of the statements made herein.

Pioneer Electric Area Roundup, Inc., Board of Directors makes donations from funds collected through Pioneer Electric's PEAR program. These funds are voluntary contributions from participating Pioneer Electric Cooperative, Inc., members and consumers.

<p>Additional pages or documentation can be attached to application. Application should be mailed to:</p> <p>Pioneer Electric Cooperative, Inc. Sheila Mason, PEAR Coordinator PO BOX 368 Ulysses, KS 67880</p>	Name of Organization
	Address
	Signature of Representative
	Date