

**TRI-COUNTY ELECTRIC PEOPLE FUND**  
**7973 E. Grand River**  
**Portland, MI 48875**  
**Phone # 1-800-421-8956 Ext. 1211**  
**Fax # 1-517-647-1211**  
**Email – peoplefund@homeworks.org**

**APPLICATION FOR DONATION  
FOR ORGANIZATION/AGENCY**

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

2. Address: \_\_\_\_\_  
Street or Post Office Box

\_\_\_\_\_

City or Town	State	Zip Code
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3. Phone #: \_\_\_\_\_

Daytime	Evening	Best Time to Reach
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4. Contact Person: \_\_\_\_\_

Name	Title
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5. Amount Requested: \_\_\_\_\_

6. Use of Funds: (Use additional sheets, if necessary)

\_\_\_\_\_

\_\_\_\_\_

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\_\_\_\_\_

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\_\_\_\_\_

7. State type of organization, ownership, non or for profit and tax status. If exempt from payment of income taxes, please attach form 501[c]3 letter from Internal Revenue Service.

8. Please include a copy of financial statements, including sources of income, for two previous years. Also provide a copy of your organization's by-laws.

9. Is your organization/agency receiving or requesting any other form of assistance or aid for above stated request (donation, grants, etc.)? \_\_\_\_Yes \_\_\_\_No  
If yes, please list:

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10. Number of individuals, families or groups your organization serves, by county or township, in the Tri-County Electric Cooperative area last year. (See attached for counties and townships served by Tri-County Electric Cooperative).

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11. Number and location of individuals, families or groups your organization serves outside the Tri-County Electric Cooperative service area.

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12. Will these funds be used to support any candidate for public office or any political purpose? \_\_\_\_\_Yes \_\_\_\_\_No If Yes, Explain.

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13. How are your agency's programs measured for effectiveness?

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14. Please list three references. (May not be a director or employee of Tri-County Electric Cooperative or the Tri-County Electric People Fund)

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Name	Phone
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Address	City	State	Zip Code
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Name	Phone
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Address	City	State	Zip Code
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Name	Phone
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Address	City	State	Zip Code
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**I represent that I am authorized by the named organization to make this application on its behalf and to make the assertions in this certification and to bind the organization accordingly. The information contained in this statement is for the purpose of obtaining funding from the Tri-County Electric People Fund on behalf of the named organization. The undersigned understands that the information provided herein is used in deciding to grant funding, and represents and warrants that the information provided is true and complete and that the Tri-County Electric People Fund may consider this statement as continuing to be true and correct until a written notice of change is provided. The Tri-County Electric People Fund is authorized to make all inquiries it deems necessary to verify the accuracy of the statements made herein. I understand that these funds will not be used to support any candidate for public office or any political purpose. I understand that the Tri-County Electric People Fund has the right to fully audit the use of this donation at any time. I also understand that Tri-County Electric People Fund and Tri-County Electric Cooperative may use this application, if approved, for publicity and promotional purposes.**

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**NAME OF ORGANIZATION**

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**SIGNATURE OF REPRESENTATIVE/TITLE**

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**DATE**

## **CHECKLIST**

**(Please return with application)**

- \_\_\_ Filled out application completely.
  
- \_\_\_ Specific details for #6 Use of Funds - The board wants a detailed breakdown of cost for what is being requested: (equipment, accessories, administrative expenses, etc. and/or documentation, bids or quotes). Amount not to exceed \$10,000
  
- \_\_\_ Copy of IRS 501(c)3 letter, if applicable.
  
- \_\_\_ Copies of your organization's financial statements for previous 2 years.
  
- \_\_\_ Copy of your organization's by-laws.

## **Grant Guidelines**

The mission of Tri-County People Fund is the accumulation and disbursement of funds for charitable purposes for the benefit of persons in the Tri-County Electric service area. This shall be accomplished by disbursement of funds to individuals and organizations for food, shelter, clothing, health, and other humane needs for programs or services that benefit a significant segment of a community.

### **Grant Guidelines**

- No funds shall in any fashion be used to support any candidate for political office or any political purpose.
- \$10,000 maximum in grants to any one organization per year. \$2,500 maximum in grants to any one family or individual per year.
- An applicant may not re-apply within 6 months from a previous application.
- An organization's financial statements, bylaws, and non-profit status must be submitted with its application. Individuals or families must submit copies of previous federal income tax forms.
- The People Fund has right to fully audit the use of donations at any time.
- An individual must live within the immediate HomeWorks Tri-County Electric cooperative service area to be qualified for a grant. The applicant does not need to be a HomeWorks Tri-County Electric Cooperative customer, although customers will receive first consideration.