



P.O. Box 1178 ~ Okmulgee, OK 74447
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APPLICATION NUMBER:



Grant Application for Organization/Agency

Application deadline is 4 p.m. on the 1st day of February, May, August, and November.
An incomplete application may not be considered.

- 1. Name of Organization:
2. Address: Email: City/State/Zip:
3. Contact Person: Name Title
4. Phone Number: Home/Mobile Work
5. Is organization requesting funding exempt from payment of income tax: Yes No
6. Number of individuals, families or groups served in Okmulgee, Creek, Tulsa, McIntosh, Okfuskee, Wagoner, and Muskogee counties in the last year:
7. Does agency serve outside Okmulgee, Creek, Tulsa, McIntosh, Okfuskee, Wagoner, and Muskogee counties? Yes No
8. What is the general purpose or goal of the organization?

For completion by the Foundation Board
District 1 2 3 4 5 6 7
Status of Request: Granted Denied Tabled
Date Reviewed:
Check Number:
Amount Granted:

9. State purpose of organizations/agency request and explain current situation. **Include amount requested** and specifics of how funds will be used. A copy of the price(s) quoted for the item(s) to be purchased with the funds **must** be included with this application.

10. A copy of your most recent financial statement listing all income and expenses, including cash or cash equivalents must be included with this request.

11. Please list other sources of funding for this request. _____

12. How are agency's programs measured for effectiveness? _____

Please list three references, who are familiar with your project.

Name: _____

Phone: _____

Address: _____

City, State, Zip: _____

Name: _____

Phone: _____

Address: _____

City, State, Zip: _____

Name: _____

Phone: _____

Address: _____

City, State, Zip: _____

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

NAME OF ORGANIZATION/AGENCY

SIGNATURE OF REPRESENTATIVE

DATE

I, _____, hereby consent that the photographs, videos, and/or electronic images for which I posed or which are taken as a result of my participation with ECE Foundation's Operation Round-Up may be used by ECE Foundation, Inc., East Central Oklahoma Electric Cooperative, or Oklahoma Association of Electric Cooperatives, its employees, agents, and representatives, and others authorized by the Foundation ("Indemnitees") in whatever way they may desire, including, but not limited to, media press releases. I consent that any such photographs, films, recordings, electronic images, or other media upon or from which they were made or produced shall be their property, and they shall have the right to duplicate, reproduce and make other such use of said photographs, videos, and/or electronic images and/or audio recordings as they may desire, without any claim on my part. I will defend, indemnify, and hold the Indemnitees and each of them harmless from all liability, damage, loss, and claims arising from or in any way associated with the use by the Indemnitees, or any of them, of the photographs, videos, and/or electronic images and/or audio recordings of myself as described above.

Name _____ Date _____