

Mille Lacs Electric Community Trust
PO Box 230
Aitkin, MN 56431
(218) 927-2191

Grant Application for Organizations

Organization Information

Date: _____

1. Name of Organization _____
2. Address _____

3. Contact Person _____
4. Phone _____
5. Is Organization For Profit Non-Profit 501c3 If non-profit
6. Organizational History/Purpose _____

7. Organizational Programs and Results _____

8. Number of individuals, families or groups served annually _____

9. Geographic area served _____
10. Does organization utilize volunteers? Yes No
Explain _____

Grant Request

	<u>from Community Trust</u>	<u>for Total Project</u>
11. Amount Needed	\$ _____	\$ _____

12. Describe the project _____

13. When is funding needed? _____

14. Other funding sources and their contributions _____

15. Attach a copy of financial statements for three years (prior year's actual, current year's estimate and next year's budget)

Statement attached

The information contained in this application is for the purpose of obtaining funding from the Mille Lacs Electric Community Trust on behalf of the undersigned. We understand that the information is confidential, for the Trustees review only. The information provided is true and complete.

Name of Organization _____

Signature (title) _____ Date _____

The Trust Board meets quarterly. Applications may be submitted at any time and will be presented for review at the next board meeting. Each organization is allowed only one donation per year.