

CADDO ELECTRIC FOUNDATION, INC.
P.O. Box 70
Binger, OK 73009
(405) 656-2322 ext.135
www.caddoelectric.com

**APPLICATION FOR DONATION
FOR INDIVIDUAL AND/OR FAMILY**

1. Name _____
Last First Middle

2. Other Members of Household:

a. _____
Last Name First Middle Relationship

b. _____
Last Name First Middle Relationship

c. _____
Last Name First Middle Relationship

d. _____
Last Name First Middle Relationship

e. _____
Last Name First Middle Relationship

3. Address: _____
Residence Address Mailing Address

City or Town State Zip Code

4. Phone Number _____
Home Work

5. Employer of those in No.1 and No.2 above:

(1) _____
Employer Supervisor

Address Phone

(2a) _____
Employer Supervisor

Address Phone

(2b) _____
Employer

Supervisor

Address

Phone

(2c) _____
Employer

Supervisor

Address

Phone

(2d) _____
Employer

Supervisor

Address

Phone

(2e) _____
Employer

Supervisor

Address

Phone

6. Reason for Request for Donation: (Include amount requested and specific use of funds)

7. Is individual of family receiving any other form of assistance or aid for above stated request?

(Food Stamps, AFDC, donations, insurance, etc.) Yes ____ No ____

8. Statement of financial condition as of _____ 20 ____

<u>ASSETS</u>	<u>AMOUNTS</u>
Cash _____	\$ _____
Banking Institution Account No.	
_____	\$ _____
Banking Institution Account No.	
_____	\$ _____
Banking Institution Account No.	
Real Estate _____	\$ _____
Partial or Wholly Owned County	Market Value
_____	\$ _____
Partial or Wholly Owned County	Market Value
_____	\$ _____
Partial or Wholly Owned County	Market Value
Securities _____	\$ _____
Description Identification No.	Value
_____	\$ _____
Description Identification No.	Value
Other Receivables (State Type: Personal Property, Loan Receivable, Auto, Life Insurance (Cash Value) Other Assets; Include description, account no., etc.)	
_____	\$ _____
Type	Value
_____	\$ _____
Type	Value
_____	\$ _____
Type	Value
TOTAL ASSETS	\$ _____
	Total

LIABILITIES

AMOUNTS

Notes Payable

\$ _____

Lender's Name

\$ _____

Lender's Address

\$ _____

Lender's Name

\$ _____

Lender's Address

\$ _____

Lender's Name

\$ _____

Lender's Address

Mortgage

\$ _____

Mortgagor's Name

\$ _____

Mortgagor's Address

\$ _____

Mortgagor's Name

\$ _____

Mortgagor's Address

Other Debt (State Type: Taxes, Outstanding Bills, Other)

\$ _____

Type

\$ _____

Type

\$ _____

Type

TOTAL LIABILITIES

\$ _____

Total

MONTHLY EXPENSES

Housing Mortgage _____ Rent _____ \$ _____

Food \$ _____

Utilities Electricity \$ _____

Gas \$ _____

Telephone \$ _____

Transportation Automobile Payments \$ _____

Gasoline \$ _____

Insurance Medical \$ _____

Life \$ _____

Automobile \$ _____

Medical Doctors \$ _____

Hospital \$ _____

Medication \$ _____

Charge Accounts _____ \$ _____

(Specify) _____ \$ _____

_____ \$ _____

_____ \$ _____

Loans (Specify) _____ \$ _____

_____ \$ _____

_____ \$ _____

_____ \$ _____

Taxes (Specify) _____ \$ _____

_____ \$ _____

_____ \$ _____

Other Expenses (Specify) _____ \$ _____

_____ \$ _____

_____ \$ _____

TOTAL MONTHLY EXPENSES \$ _____

SOURCES OF MONTHLY INCOME

AMOUNTS

Salary \$ _____

Bonus, Tips & Commissions \$ _____

Dividends & Interest \$ _____

Real Estate Income \$ _____

Farm Income \$ _____

Other: (Please specify: Alimony, Child Support, Social Security, SSI, Other)

_____ \$ _____

Type _____ \$ _____

_____ \$ _____

Type _____ \$ _____

_____ \$ _____

Type _____ \$ _____

TOTAL SOURCES OF MONTHLY INCOME \$ _____

9. Please list three references. (Must not be a director or employee of Caddo Electric Cooperative or Caddo Electric Foundation, Inc.)

Name Phone

Address City State Zip Code

Name Phone

Address City State Zip Code

Name Phone

Address City State Zip Code

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

SIGNATURE OF APPLICANT/RECIPIENT

SIGNATURE OF SPOUSE

DATE