

**HIGH PLAINS POWER ROUND UP FOUNDATION**  
**1775 E. Monroe Ave**  
**RIVERTON, WY 82501**  
**307-856-9426**

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

**PLEASE TYPE OR PRINT:**

1. Name: \_\_\_\_\_  
Last First Middle

2. Other members of the household:

	Last name	First	Middle	Relationship
a.	_____	_____	_____	_____
b.	_____	_____	_____	_____
c.	_____	_____	_____	_____
d.	_____	_____	_____	_____

3. Address: \_\_\_\_\_  
Street or PO Box

\_\_\_\_\_

City State Zip Code

4. Phone Number: \_\_\_\_\_  
Home Work

5. Employer of those listed in Nos. 1 and 2 above:

(1) \_\_\_\_\_ Full time \_\_\_\_\_ Part time \_\_\_\_\_  
Name of Employer

(2a) \_\_\_\_\_ Full time \_\_\_\_\_ Part time \_\_\_\_\_  
Name of Employer

6. Total Household income from all sources including wages, child support, social security, unemployment, retirement pension, other: \$ \_\_\_\_\_

7. Total expense for same period included in No 6: \$ \_\_\_\_\_

8. How much does the household have now in cash, checking and savings? \$ \_\_\_\_\_

9. Estimated value of all assets owned: \$ \_\_\_\_\_

10. Purpose of request: (Include amount requested. Please be as specific as possible as to the use of funds and the nature of emergency.) **Amount you are requesting:** \$ \_\_\_\_\_

Purpose: \_\_\_\_\_  
\_\_\_\_\_

11. Is individual or family receiving any other form of assistance or aid for above stated request (donations, insurance, federal, state or local governmental aid, etc.)? Yes \_\_\_\_\_  
No \_\_\_\_\_

If yes, please list:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

12. Are you a customer of High Plains Power, Inc.? \_\_\_\_\_

13. Please list three references. (Do not include Director or Employee of High Plains Power, Inc. or Foundation Board.)

_____	_____	_____	_____
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 High Plains Power Round Up 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 High Plains Power Round Up Foundation may consider this statement as continuing to be true and correct until a written notice of a change is provided. The High Plains Power Round Up Foundation 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