



**NOEC Foundation, Inc. | Operation Round-Up**  
PO Box 948, Vinita, Oklahoma 74301 | 918.256.6405

## Application for Donation for Organization/Agency

Name of organization/agency \_\_\_\_\_

Federal tax ID # \_\_\_\_\_ Website \_\_\_\_\_

Mailing address \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Physical address, if different \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Contact person \_\_\_\_\_ Title \_\_\_\_\_

Cell and office phone \_\_\_\_\_ Email \_\_\_\_\_

Purpose of organization/agency \_\_\_\_\_

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Number of individuals, families, or groups served in Craig, Ottawa, Delaware, Mayes, and Rogers counties in the last year \_\_\_\_\_

Does your organization/agency serve outside Craig, Ottawa, Delaware, Mayes, and Rogers counties?  YES  NO .....

If yes, please provide information on number served and location \_\_\_\_\_

Amount requested \_\_\_\_\_ Need by date \_\_\_\_\_  
Not to exceed \$10,000 annually

Describe your project and how funds will be used \_\_\_\_\_

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Is your organization/agency exempt from paying income tax? If yes, a copy of the letter (Form 501C3) from the Internal Revenue Service **must be attached.**  YES  NO .....

List the amount and source of any matching funds available for this request \_\_\_\_\_

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

How is this organization/agency program measured for effectiveness? \_\_\_\_\_

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

**Please attach:**

- 1. A statement of the purpose for this request
- 2. An explanation of the source of your funding (county tax, etc.) and how it is being used.
- 3. Two competitive bids for the items(s)/service(s) to be purchased with these funds
- 4. A copy of your most recent financial statement listing all income and expenses, including cash or cash equivalent must be included with this request. A YTD balance sheet or income statement is preferred.

**Additionally, please list three references familiar with your project**

\_\_\_\_\_  
Name, title, and phone

\_\_\_\_\_  
Name, title, and phone

\_\_\_\_\_  
Name, title, and phone

**The information contained in this statement is for the purpose of obtaining funding from the NOEC Foundation, Inc., on behalf of the undersigned. The undersigned understands that the information provided herein is used in deciding to donate funds, and the undersigned represents and warrants that the information provided is true and complete and that the NOEC Foundation, Inc., may consider this statement as continuing to be true and correct until a written notice of a change is provided. The NOEC 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