

# APPLICATION 2023

PO Box 611 | 3366 Bridge Ave  
Albert Lea MN 56007  
(507) 379-8841 · (800) 734-6421



*Only non-profit, charitable organizations will be considered for funding.  
501 c (#) form or IRS Determination Letter is **required** with each application.  
**Failure to provide documentation, will delay, or may disqualify application.**  
**Please provide documentation with each application.***

Applicant | Organization Name: \_\_\_\_\_ Date: \_\_\_\_\_

*(Check will be made out to the organization name and mailed to this address below)*

Contact Person: \_\_\_\_\_ Title: \_\_\_\_\_ Phone: \_\_\_\_\_

Organization Address: \_\_\_\_\_ City: \_\_\_\_\_

State: \_\_\_\_\_ Zip: \_\_\_\_\_ County: \_\_\_\_\_ Additional Contact Info: \_\_\_\_\_

Mailing Address if different from above \_\_\_\_\_

Email Address: \_\_\_\_\_ Website: \_\_\_\_\_

Amount Requesting: \$ \_\_\_\_\_ Total Amount of Project or Event: \$ \_\_\_\_\_

How Many People Benefiting From This Project or Event: \_\_\_\_\_

Has Your Organization Received a Previous Grant From ORU: \_\_\_\_\_ If Yes, When: \_\_\_\_\_

What Project or Event was the Previous Grant For: \_\_\_\_\_

## PROJECT DESCRIPTION

Name of Project or Event: \_\_\_\_\_

Funds will be used for: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Project or Event Date: \_\_\_\_\_

How Project or Event Benefits Community: \_\_\_\_\_

\_\_\_\_\_

Organization History: \_\_\_\_\_

\_\_\_\_\_

Organization mission & goals: \_\_\_\_\_

\_\_\_\_\_

Other Revenue Sources: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_ I will allow a photo with my name & organization to appear in FMEC publications| social media.

Signature: \_\_\_\_\_

*If organization applying is a school,  
must be signed by the principal of the school.*

<b>APPLICATION CHECKLIST - Applicant please complete</b>	
Applicant is nonprofit or charitable organization	<input type="radio"/>
501 c (#) form, IRS Determination Letter or nonprofit status in included	<input type="radio"/>
If school applying – must be signed by Principal	<input type="radio"/>
Project or event is after the ORU meeting date	<input type="radio"/>
Request meets guidelines	<input type="radio"/>

**Submit to:**  
Dawn Schroeder  
Freeborn Mower Electric Cooperative  
PO Box 611 | 3366 Bridge Ave.  
Albert Lea MN 56007  
[dawn.schroeder@fmec.coop](mailto:dawn.schroeder@fmec.coop) | [www.fmec.coop](http://www.fmec.coop)