

B-Y Electric Operation Round Up Fund

PO Box 158, Tabor, SD 57063 Phone: 605-463-2507 Fax: 605-463-2419 Attn: Operation Round Up Coordinator

Application for Individual/Family

Disbursements of funds are only considered under the following circumstance:

1. An unforeseen event/condition has occurred (e.g. a special need caused by an event/condition that was neither expected nor intended).

The following forms *must* be completed and attached to application:

Application (completely filled out and signed)
Tax Return (most current year filed)
Doctor Statement (if currently unable to work or totally disabled)

Applications submitted without all necessary documents attached will not be considered.

If you have questions and need assistance with the application, please call Stephanie at 1-605-463-2507.

B-Y Electric Operation Round Up Fund

APPLICATION FOR DONATION FOR INDIVIDUAL AND/OR FAMILY

Applic	Applicant: Phone:								
Addre	Address: City: -								
Explai	nation of Unforesee	en Event/Condition/Special	Need:	Amo	unt Requested:	\$			
Specif	fic Use of Funds:								
				·	T				
	Members o	of Household	Age	Relationship	Employed	Salary			
1	Members	of Household	Age	Relationship	Employed Yes □ No □	Salary			
1 2	Members	of Household	Age	Relationship		Salary			
	Members	of Household	Age	Relationship	Yes □ No □	Salary			
2	Members	of Household	Age	Relationship	Yes □ No □ Yes □ No □	Salary			
3	Members	of Household	Age	Relationship	Yes □ No □ Yes □ No □ Yes □ No □	Salary			
2 3 4	Members	of Household	Age	Relationship	Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No □	Salary			
2 3 4 5	Members	of Household	Age	Relationship	Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No □	Salary			
2 3 4 5 6		Household Members 18 and			Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No □ Yes □ No □	Salary			
2 3 4 5 6				r listed above:	Yes	Salary reason for departure:			
2 3 4 5 6	loyment History of	Household Members 18 and		r listed above:	Yes				
2 3 4 5 6	loyment History of	Household Members 18 and		r listed above:	Yes				
2 3 4 5 6	loyment History of	Household Members 18 and		r listed above:	Yes				

DEBTS	Lender's Name & Address	Amount
Credit Card		
Credit Card		
Loan		
Loan		
Loan		
Mortgage		
Property Taxes		
Vehicle Taxes		
Other		
Other		
	Total	

ASSETS		Information			Amount
Checking Account	Bank:				
Savings Account	Bank:				
House Value					
Land					
IRA					
401k					
Investments					
Vehicle	Make:	Model:	Year:		
Vehicle	Make:	Model:	Year:		
Boat/Four-Wheeler	Make:	Model:	Year:		
Life Insurance	Company:				
Other					
				Total	

Income					
Monthly	Person	Amount			
Wages					
Wages					
Bonus, Tips & Commissions					
Social Security					
Social Security					
SSI					
SSI					
AFDC					
Child Support					
SNAP/Food Stamps					
Alimony					
Dividends & Interest					
Rental Income					
Other Income					
Total					

Other Assistance you have received or applied for					
Assistance	Amount				
Family					
Church					
Organization					
Organization					
Organization					
Other:					
Other:					
Total					

	Monthly Expenses			Amount
	Housin	g Mortgage □ R	ent 🗆	_
	Utiliti	Elec	tricity	
			Gas	
			Water	
		2.41	Food	
	Communication		Phone	
			Cable	
	Transportatio	Internet/House In Automobile Pay		
	Transportatio		soline	
	Insuran			
	Insuran	Life Insu		
		Medical Insu		
	Medic	al D	octors	
		Но	ospital	
		Medication/	Drugs	
	Charge Accoun	ts Credi	t Card	
		Credi	t Card	
	Loan Accoun	ts	Loan	
			Loan	
			Loan	
	Other Expense		Other	
			Taxes	
			Total	
List Hom	three references with complete names, addresses and ame Yankton Electric Association, Inc. may be listed: Name: Address:	telephone numbers. No Phone: City:		
2.	N	DI.		
۷.				
	Address:	City:		State:
3.	Name:			
	Address:	City:		State:
ndersig at the ontinui ommit orein. A stated	ormation contained in this statement is for the purpose of obtaining the desired understands that the information provided herein is used in decinformation provided is true and complete and that Bon Hommeng to be true and correct until a written notice of a change is putee for Operation Round Up are authorized to make all inquiries. As a condition of receiving and accepting these funds, the undersilating the application. Any funds not used shall be returned to the B-	iding to grant funding, and each Yankton Electric Association rovided. Bon Homme Yank they deem necessary to verify gned agrees that all funds will Y Electric Operation Round U	ch unders n, Inc. m ton Elect y the acc l be used	signed represents and warra ay consider this statement tric Association, Inc. and uracy of the statements m
	TURE OF APPLICANT/RECIPIENT:			
.GNA	TURE OF SPOUSE:			