

# Mitchell Electric Charitable Fund

PO Box 409 Camilla, GA 31730 (229) 336-5221 or 1-800-479-6034 FAX: 229-336-7088

Office use only:	For

## **Agency / Organization Application**

All attached sheets, including financial spreadsheets, must be completed.

Attach a copy of the exemption letter from the IRS (Form 501(c) 3) and audited financial statements for the last two years or tax <u>returns</u> for the last 2 years.

Applications will not be considered if information is not complete.

## Please submit NINE (9) copies of the complete application, including attachments

		Date	e:	
Agency / Organization Name				
PO Box / Street Address				
City	State		Zip	
Contact Person		Title		
Contact Phone (day)		(night)		
Project Request:				nt \$ num Grant is \$10,000
Have you applied for assistance of If yes, list other sources of assista	elsewhere?  ance that you have apple	YesYes	No eceived that will b	e used on this project.
	\$			\$
	\$			\$
	\$			\$

<b>Community Impact:</b>		
Number of individuals, families and/or g	groups served by this organization/ago	ency:
In what county (s)?		
<b>Business References:</b>		
Please give three references that are fam Mitchell Electric Charitable Fund or Mit		
Name	City	Phone #
Name	City	Phone #
Name	City	Phone #
The information contained in this state Charitable Fund on behalf of the undersign is used in deciding to grant funding, and is true and complete and that Mitchell Etrue and correct until a written notice of make all inquiries deemed necessary to the contained in this state.	gned. Each undersigned understands t each undersigned represents and war electric Charitable Fund may conside a change is provided. Mitchell Electric	hat the information provided herein trants that the information provided to this statement as continuing to be ric Charitable Fund is authorized to
Agency/Organization Name	Authorized Signature	Date

Organization Information:	Describe organization and list board of directors or officers of organization (include addresses and phone numbers).

Grant Request:	Explain how funds will be used, and attach itemized costs of contract work and/or equipment needed. <b>Requirement:</b> Must submit two (2) estimates on labor and equipment required. This must be specific.								

Previous	Disbursem	ents:						
Have you	received di	sbursement	s from this or	ganization bef	fore?	_Yes	No	
If yes, ple	ase comple	te the inforr	nation below	and list <b>ALL</b> o	dates and dis	bursements:		
Year								
Amount								
Give a de	tail of how	the money v	was disbursed	:				

06/09/2014 -5-

### Example:

### Not for Profit Inc.

Projected Cash Flow Statement for the year ending December 31, 2002

EXAMPLE													
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Bank Balance													
Beg. Of Month	10,000	2,120	740	360	480	600	720	840	960	1,080	1,200	1,320	
INCOME:													
Fund Raisers	1,500	1,500	2,500	3,000	3,000	3,000	3,000	3,000	3,000	3,000	3,000	3,000	32,500
Cash Sales	200	200	200	200	200	200	200	200	200	200	200	200	2,400
Bank Finance	11,500												11,500
MEMC Operation Roundup	5,000												5,000
Total Income:	18,200	1,700	2,700	3,200	3,200	3,200	3,200	3,200	3,200	3,200	3,200	3,200	51,400
EXPENSES:													
Electricity	250	250	250	250	250	250	250	250	250	250	250	250	3,000
Equipment	5,000												5,000
Furniture and Fixtures	3,000												3,000
Interest	230	230	230	230	230	230	230	230	230	230	230	230	2,760
Land & Building	15,000												15,000
Loan Repayment	400	400	400	400	400	400	400	400	400	400	400	400	4,800
Machinery													
Other Expenses													
Rent	600	600	600	600	600	600	600	600	600	600	600	600	7,200
Telephone	120	120	120	120	120	120	120	120	120	120	120	120	1,440
Transport Cost	180	180	180	180	180	180	180	180	180	180	180	180	2,160
Vehicles													
Wages	1,300	1,300	1,300	1,300	1,300	1,300	1,300	1,300	1,300	1,300	1,300	1,300	15,600
Total Expenses:	26,080	3,080	3,080	3,080	3,080	3,080	3,080	3,080	3,080	3,080	3,080	3,080	59,960
Surplus/Shortfall	-7,880	-1,380	-380	120	120	120	120	120	120	120	120	120	
Bank Balance													
end of month	2,120	740	360	480	600	720	840	960	1,080	1,200	1,320	1,440	1,440

Projected Cash Flow Statement for the year ending December 31, _	
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	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Bank Balance													
Beg. Of Month													
INCOME:													
Fund Raisers													
Cash Sales													
Grants													
MEMC Operation Roundup													
Other Income:													
Total Income:													
EXPENSES:													
Electricity													
Equipment													
Furniture and Fixtures													
Interest													
Land & Building													
Loan Repayment													
Machinery													
Other Expenses													
Rent													
Telephone													
Transport Cost													
Vehicles													
Wages													
Other Expenses:													
Total Expenses:													
Surplus/Shortfall													
Bank Balance													
end of month													
11/15/2002													

	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Bank Balance									-				
Beg. Of Month													
INCOME:													
Fund Raisers													
Cash Sales													
Grants													
Other income:													
Total Income:													
EXPENSES:													
Electricity													
Equipment													
Furniture and Fixtures													
Interest													
Land & Building													
Loan Repayment													
Machinery													
Wages													
Rent													
Telephone													
Transport Cost													
Vehicles													
Other expenses:													
-													
Total Expenses			_										
Surplus/Shortfall													
Bank Balance													
end of month													
ena or month					<u> </u>			L		<u> </u>			<u> </u>

Balance Sheet
(date)

#### **BALANCE SHEET**

#### **ASSETS**

### **LIABILITIES AND NET ASSETS**

CURRENT ASSETS:	CURRENT LIABILITIES:	
Cash	Notes Davishle	
Total Current Assets:	Total Current Liabilities	
FIXED ASSETS:	LONG TERM LIABILITIES:	
LandBuilding		
Vehicles Less: Depreciation	Total Long Term Liabilities	
Machinery & Equipment Less: Depreciation		
Furniture and Fixtures Less: Depreciation	Unrestricted Restricted	
Total Fixed Assets	Total Net Assets	
TOTAL ASSETS:	TOTAL LIABILITIES & NETASSETS:	

11/15/2002