

Holmes-Wayne Electric Foundation, Inc. "Operation Round-Up"



Application for Individual and/or Family Assistance

1) Applicant's Pe	rsonal Infor	mation					
First Name	Middle Initial	Last Name				Age	Primary Phone #
Present Address		City		State	Zip	How Long?	Secondary Phone #
2) Information Bo	agrding An	olioont					
2) Information Regarding App Present Employer		Employer's Address				Date Employed	
Trocont Employer						, ,,,,,	
Occupation		Supervisor's Name		Work Phone #		Monthly Take Home Pay	
		•		•			
Other Sources of Incom	ne (Description)					Monthly Income	
3) Other Member	s of Househ	old				-	
First Name	Other Members of Household First Name Middle In. Last Name Relationship			Ago	Employed? If yes, list employer & monthly income		
riistivanio	ivildule III.	Last Name	Relationship	Age	Linployeur ii	yes, list employ	er & monthly income
4) List All Existin	g Debts of A	Applicant (and Spous	se or Co-App	licant, if A	pplicable)		
Creditor		Address & Phone #		Account #	Original Amt	Present Bal	Monthly Payment
Mortgage							
Auto Loan							
Other Loan							
Credit Card							
Other							
Other							

5) Other Monthly Obligations & E	xpenses	
Description	Paid to Whom?	Monthly Payment
Rent (for Residence)		
Electricity		
Natural Gas / Propane		
Water / Sewer		
Telephone		
Other Utilities		
Other (Describe)		
Other (Describe)		
	•	_
	icant (and Spouse or Co-Applicant, if Applicable)	
Asset Description (House, Property, Vehicles	s, Checking Account, Savings Account, Other Accounts & Assets)	\$ Value / Amount
7) Additional Comments & Inform	nation	
Inc. for the benefit of the undersigned. The undering, and individually represents and warr Foundation, Inc. may consider this statement Wayne Electric Foundation, Inc. is authorized All information will be kept in the strictest confector Electric Foundation, Inc. has the right to fully Foundation, Inc. and Holmes-Wayne Electric	is for the purpose of obtaining funding or assistance from the Holmes-Wandersigned understands that the information provided herein is used in ants that the information provided is true and complete and that the Hot as continuing to be true and correct until a written notice of change is do to make all inquiries deemed necessary to verify the accuracy of the suffidence and will be used for the purposes intended. I understand that audit the use of the donation at any time. I also understand that the Hot Cooperative, Inc. may use this application, if approved, for publicity are defor this purpose unless approved by me prior to the promotion.	n deciding to grant olmes-Wayne Electric provided. The Holmes- statements made herein. the Holmes-Wayne dolmes-Wayne Electric
Signature of Applicant / Recipient, or	r Representative / Guardian	Date
Signature of Spouse / Co-Applicant		 Date