

## Application Procedures for Operation Round Up Grant Funding

South River Electric Membership Corporation administers Operation Round Up through the Community Assistance Corporation.

### Important:

- No handwritten or recreated (“see attached”) applications will be accepted.
- The official application form must be used and placed as the first page of your packet.

### Eligibility & Funding

- Nonprofit agencies in Harnett, Cumberland, Sampson, Johnston and Bladen counties may apply.
- Organizations must be in operation for at least one year.
- Organizations can be funded one time within a 12-month period.
- Funding is limited to organizations within South River EMC’s service area.

### Funding Requirement:

- Requests must be made to implement a program or purchase equipment that supports a specific program and enhances community impact and services.

### Funding Restrictions

Funds cannot be used for:

- Salaries or general operating expenses
- Professional development (except emergency services training)
- Government agencies (except emergency services)

### Additional notes:

- Each program must operate independently to qualify for multiple requests within a 12-month period.
- Individual churches are not eligible unless part of a broader community-based program or independently operated entity.

### Application Requirements

- Submit a complete application packet to: [sremc@sremc.com](mailto:sremc@sremc.com)
- Include all required documents and attachments
- Incomplete applications will not be considered

### Proposal Letter (Required)

Include a proposal letter that is:

- Maximum 2 pages, double-spaced
- Signed by an authorized representative

### The letter should clearly explain:

- Program description and community impact (including service area and number served)
- Amount requested and total project budget
- Target population and need
- Program goals and how success will be measured

- Coordination with similar services
- Other funding sources (pending or secured)

**Required Attachments Checklist**

Be sure to include:

- Proposal letter (with signature)
- IRS tax-exempt letter or Federal ID
- Organization mission statement
- Board of Directors list
- Financial statements (current and previous year; no tax forms)
- Detailed, itemized budget
- Bids, estimates, or invoices related to request


**Additional Information**

- Grants are awarded quarterly (March, June, September, December).
- Applicants are notified by the end of the award month.

For more information, contact the Vice President of Member Services and PR at [sremc@sremc.com](mailto:sremc@sremc.com) or 910.230.2982.



# South River Electric Membership Corporation

A Touchstone Energy® Cooperative 



## Donation Application for Organization/Agency

*This form must be used in the application process, do not use "see attached." This application must be the top form in your packet.*

Date Completed

1. Name of Organization

2. Address

City, State Zip

3. Contact Person

E-Mail

4. Phone Number

Alternate

5. A copy of your organization's financial statement from a previous year **MUST** be attached to this application.

6. Is the organization requesting funding exempt from the payment of income tax? Yes  No

7. What is the general purpose or goal of the organization?

8. What will the requested funds be used for? How will the grant help your organization achieve its goal?

9. Amount Requested (please attach an itemized budget) \$

10. How will this amount help your organization achieve its goal?

11. Is the amount requested the total amount needed? Yes  No

If no, what is the amount needed?

12. What are your agency's administrative costs?

13. What communities are served by your agency/ organization?

14. Approximately how many individuals or families do you serve?

Of the population you serve, approximately what percentage lives in South River EMC's service area?

Does your facility receive electric service from South River EMC? Yes  No

15. Please list other sources of funding for use of request as described on the first page. What has your organization already done to raise the amount needed?

16. How are your organization's programs measured for effectiveness?

17. CONTINGENCY PLAN: If we are unable to award a grant for some or your entire requested amount, what alternatives do you have?

18. How did your organization find out about Operation Round Up?

19. If funded, how will your agency recognize Operation Round Up as donor?

20. Will you accept partial funding?  Yes  No

If you indicated yes, what is the minimum amount you will accept?

The information contained in this statement is for the purpose of obtaining funding from the Community Assistance Corporation on behalf of the undersigned. The undersigned understands that the information provided herein is used in deciding grant funding, and the undersigned represents and warrants that the information provided is true and complete and that Community Assistance Corporation may consider this statement as continued to be true and correct until a written notice of a change is provided. The Community Assistance Corporation is authorized to make all inquiries they deem necessary to verify the accuracy of the statements made herein.

Name of Organization

Signature of Representative:

Date

Completion of complete name serves as an electronic signature.

### CHECKLIST:

- Please be sure your proposal letter contains all the information outlined in the basic instructions and appropriate signatures (place behind application).
- Attach copy of IRS letter indicating tax-exempt status and/or Federal ID Number.
- Attach copy of organization’s mission statement.
- Attach list of current board of directors.
- Attach copy of most recent and previous year’s operational budget/balance sheet (to include all assets and liabilities – NOT tax forms)
- Attach appropriate bids, estimates, and bills directly relating to request.
- Attach a *detailed, itemized budget* to support your request.
- If your organization is less than one year old, provide the most recent budget statements.
- Please send the complete application packet to sremc@sremc.com.*