

Valley Rural Electric Cooperative, Inc.

Members Helping Members Program

APPLICATION

Name(s): _____
(as printed on your electric bill)

Address: _____

City: _____ State: _____ Zip Code: _____

Telephone Number: _____
(including area code)

VREC Account Number(s): _____

Reason for Economic Hardship: _____
(death, hospitalization, divorce, loss of employment, etc.)

Do you receive Low Income Home Energy Assistance Program funds? _____

Form completed by: _____

Telephone number: _____
(including area code)

All information will be kept strictly confidential.

Please return to: Valley Rural Electric Cooperative, Inc.
10700 Fairgrounds Road, PO Box 477
Huntingdon, PA 16652-0477