

In order for Banklowa to provide a decision with your donation request, this form must be completed for any request over \$250 and MUST BE signed by the individual or someone within the organization making the request. Email forms will be accepted as long as it clearly demonstrates who sent the email. Incomplete forms will not be considered for donations or may be returned for completion. A Banklowa representative will contact you regarding the bank's decision. Approved cash donations will be mailed to the main office address noted below.

Date of Request _____	Date Response Needed By _____
Name of Organization or Event _____	
Organization's Federal Tax ID # _____	
Organization's Main Office Address _____	
Organization's Main Phone # _____	Organization primary contact person: _____
Does this organization already bank with Banklowa?	Yes, Deposit Accounts <input type="checkbox"/> Yes, loans <input type="checkbox"/> No Deposit Accounts <input type="checkbox"/> No Loans <input type="checkbox"/>
Contact Name _____	
Contact Address _____	
Contact Name's Phone # _____	
Do you personally bank with Banklowa?	Yes <input type="checkbox"/> No <input type="checkbox"/>
Specific address of where these requested funds would be used if granted (street, city, state, zip code): _____	
Organization's web address: _____	
Purpose of funding needs: _____	
If Banklowa volunteers are being requested, please indicated how many, for what time, and for what purpose: _____	
If you are requesting door prizes, please indicate how many items or dollar value of items are you requesting? If approved, you will be notified when ready for pick-up. _____	

Questions 1 - 5 must be completed if requesting a cash donation.

1. What is the dollar amount you are requesting? _____
2. What percentage of this donation will go directly to the cause? _____
3. If applicable, please mark the box if the PRIMARY purpose of this request will benefit:
 - Affordable housing primarily benefitting **low- or moderate-income individuals**
 - Community Services primarily benefitting **low- or moderate-income individuals or geographical areas**
 - Activities that revitalize or stabilize **low- or moderate-income geographies** by: _____
 - Donation helps a federally declared disaster area by _____
 - Other. The requested donation will be used for _____
4. What is the income guidelines used by your organization for low or moderate income? (This must be completed if any of the three boxes above are checked.) *This information will remain confidential and will only be used by Banklowa for documentation of Banklowa's efforts to meet Federal Regulatory requirements under the Community Reinvestment Act (CRA).* \$ _____
5. Where does this donation benefit? Select the area(s) that this investment benefits. Check all that apply:

<input type="checkbox"/> Benton County	<input type="checkbox"/> Buchanan County	<input type="checkbox"/> Other areas in Iowa or the region
<input type="checkbox"/> Linn County	<input type="checkbox"/> Black Hawk County	<input type="checkbox"/> Other: _____

By submitting this donation request form and signing below, I also grant Banklowa permission to contact the organization or myself personally regarding our banking needs.

Request submitted by: _____
 (signature)

Print Name: _____

Title: _____



Community Donation Request Form

SECTION C - BANKIOWA USE ONLY

The Banklowa representative handling this request should complete the rest of the section.

A. Geocode the specific address listed on page one that will benefit from this donation. Once geocoded, print that page, then click on the "demographics" button. Print out the demographics page and attach both to this form.

Organization's Name 0 _____

FFIEC Geocoding System

0 _____

From the FFIEC website page, what was the Income Level of this census tract? LOW MODERATE HIGH

B.. Please provide and attach documentation obtained from the RECIPIENT of the investment that supports the fact that this donation can earn Banklowa CRA credit. what meets the definition of "community development" so the bank can earn CRA credit for this donation?

C. Banklowa officer submitting this form. This is the person who will be contacted if additional information or documentation is needed and will be responsible for informing the requestor of the decision made.

- Pre-approved donation.
New donation over \$250 approved - accounting please pay
need committee approval and accounting to pay.
Market committee approved - new request less than \$250. Paid at branch office level.

Date Approved: _____ by: _____

Amount of Investment: _____ Term of Investment (one-time, pymt. 1 of 5, etc.) _____

Date of Investment: _____ Check # _____

Check Payable to : _____ (If approved, check will be mail to the contact person/address on page 1)

If donation is items, list what was given: _____

Dollar Value of items donated: \$ _____

What are the benefits to the organization if this gift or donation is approved?
What are the benefits to the bank if this gift or donation is approved?
What are the benefits to our community if this gift or donation is approved?

CRA SECTION - REQUIRED

CRA Credit - please check: YES NO

CRA ELIGIBILITY REQUIREMENTS

EXPLAIN WHY THIS DONATION IS OR IS NOT CRA ELIGIBLE

Empty box for explaining CRA eligibility.

Initials: _____ Date: _____