



Community Donation Request Form

4. If the investment benefits a broader statewide or regional area, explain how funds are allocated throughout the area.

5. Provide a description of the services offered by your organization or the purpose of your fundraising event. If your organization is a non-profit organization or your request is for a fundraising event, explain in detail who will be the primary benefactor(s) of your efforts.

5a. Answer this question only if your request is for a fundraising effort or if you are a non-profit organization. What percentage of this donation will go directly to the cause?

6. Please provide in writing below or attach a copy of your organization's /company's mission statement, general goals, and purpose.

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: _____

Date _____
 
Member FDIC



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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 too and attach both to this form.

Organization's Name 0

Use the FFIEC website to determine if the census tract where the funds will be used is in a Low -or Moderate-income level.

FFIEC Geocoding System

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 \$100 approved - accounting please pay
need committee approval and accounting to pay.
Market committee approved - new request less than \$100. Paid at branch office level.

Date Approved: by:

Amount of Investment

Term of Investment: (one-time payment, payment 1 of 5, etc.)

Date of Investment:

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

Check #

If donation items, list what was given:

Dollar Value of items donated: \$

CRA SECTION - REQUIRED

CRA Credit - please check: YES NO

CRA ELIGIBILITY REQUIREMENTS

EXPLAIN WHY THIS DONATION IS OR IS NOT CRA ELIGIBLE

Large empty box for explanation of CRA eligibility.

Initials: Date: