



This is Your Community. This is Your Bank.

Donation Request Form

Community First Bank of Indiana is committed to supporting non-profit organizations and their efforts to serve our communities. To help us in considering your donation or sponsorship, please submit your written request to our Marketing Department at least **1 month** prior to event.

Thank you for taking the time to fill out this form. Please submit it, along with any additional materials relating to your request, to any CFB Branch location or mail to: 201 W. Sycamore Street Kokomo, IN 46901 or email to lschroer@cfbindiana.com.

Please make sure to fill this form out as completely and specifically as possible. If you have any questions, you can contact the Marketing Department at 765-456-4346.

Date of Request: _____ Date Request Needed: _____

Name of Group or Organization: _____

Street Address: _____ City: _____ State: _____ Zip : _____

Person Making the Request: _____

Title: _____ Phone: _____

Email Address: _____ Fax: _____

Organization's Primary Purpose/Mission:

Is your group or organization a 501 © (3) nonprofit agency? Yes _____ No _____

Is your group or organization a customer of Community First Bank? Yes _____ No _____

Are there any Community First Bank Associates involved with your group or organization?
Yes _____ Please List: _____ No _____

DETAILS OF EVENT:

Purpose of your request/Name of Event: _____

Location of Event: _____

Type of Request (Check all that apply):

Monetary Amount Requested: \$ _____

Giveaway Item(s) Quantity: _____ Date Needed: _____

**Please be sure to include documentation supporting your request such as a flyer, newsletter or event program about the organization and/ or event.*

ADVERTISING INFORMATION:

Will there be any advertisement/promotions featuring Community First Bank? Yes _____ No _____

If Yes, please describe: _____

Please indicate ad size measurements: _____ Black & White or Color Ad: _____

Bleed or no bleed _____ Format for logo and/ or Ad: PDF _____ JPG _____ OTHER _____

Date the logo and/ or Ad is due: _____

Email to send the logo and/ or Ad to: _____

INTERNAL USE ONLY

Date received by Community First Bank: _____ Approved? _____

Approved by Marketing Department: _____

Date Submitted to Acct: _____ Amount: _____

Special Instructions: _____
