



First Security Bank
DIVISION OF GLACIER BANK

DONATION/SPONSORSHIP REQUEST FORM

Today's Date: Date Funds Needed:
Amount Requested: Total Funding Needed:
Name of Organization: EIN:
Physical Address of Organization:
Mailing Address(if different)
This organization is a:

Will our donation be acknowledged in any way? Yes ☐ No ☐

i.e. banners at the event, logo on t-shirts, program listings, thank you ads etc.) Please attach advertising instruction specifications if applicable.

Does the organization bank with First Security? Yes ☐ No ☐

Name/Title of Person Making Request:

Contact Phone#: Email:

Organization Mission Statement:

Briefly describe the organization's programs & services:

For what specific purpose will the funds be used? What is the community benefit and in what county will funds be used?

Please indicate if any portion of this donation provides benefits to the Bank (e.g., meals, advertising, tickets, etc.) and, if so, specify the amount and type:

Dollar Amount \$ Benefit type:

How many unique individuals were served in the most recent fiscal year **or** will be supported by this donation?

Served in fiscal Year: **or**, directly from donation:

What percentage of individuals above are low-moderate income?**

**Individual's whose income falls below \$84,640 in Missoula County or \$69,840 in Ravalli & Sanders Counties.

If above 50% please indicate how income is determined (i.e. pay stubs, self reported, qualifying for government assistance such as SNAP, TANF, Medicaid etc.):

Signature of requester:

_____ Date:

Please submit this application, along with a completed IRS Form W9 and other applicable documents in one of the following ways:

- Email: fsbdonations@fsbmsla.com
- Drop off: 1704 Dearborn Ave in Missoula, or, at your local branch in Ravalli and Sanders Counties.