

Community Giving Request Form

Legacy Bank is committed to the betterment of the communities we serve by investing both economic and social resources in donations, sponsorships, public relations activities and community-related events. Please review our guidelines to assist you in completing this form. When you are finished, return this form to your local Legacy Bank branch (Altoona, Bondurant, Clive or Mitchellville).

If a monetary donation is being requested, who should the check be made payable to?					
Contact Phone:					
Address:					
Cities or Counties served?					
Does the organization fund/sponsor other non-profit organizations? ☐ Yes ☐ No If so, which ones?					
Address: City: State: Zip: Email: Legacy Bank Customer? If yes, who is your contact at Legacy Bank? 501(c)(3) organization? Yes					

Details of Request					
Amount or type of do	nation requested:	Has your organization received financial support from Legacy Bank in the previous 12 months?		Date donation is needed by: (minimum of 30 days from date presented to bank)	
Description of the req	uest, including how many	people are estimated to	o be helped and how donation	will be used:	
Have you contacted any other organizations for donations? Yes No If so, whom and what was the donation?					
Can/will Legacy Bank receive publicity or recognition? Please sign your name to endorse this request. Please sign your name to endorse this request.					
How does this request benefit Legacy Bank?			Date of Request:		
Is there anything else	you would like to include o	or clarify?			
Bank Use Only	Request received by bar Date: Employee:	Date:	wed by: pyee:	Amount or Donation Approved or Rejected:	