



Charitable Gift Request Form
(for amounts over \$250)

Due to the volume and varied nature of contribution requests we receive, your completion of this form will greatly help us in considering your request.

Please note that Union Bank will only make donations to non-profit organizations, and will not honor requests from individuals.

Please tell us about your organization

Organization Name:

Name and Title of Individual Completing Form:

Executive Director or Board President:

Address (Street/City/State/Zip):

Phone Number:

Website Address:

Fax Number:

Email Address:

- Have you received support from us in the past? Yes No
Are you a 501(c)3 organization? Yes No If no, Union Bank cannot consider request
Are you a local chapter of a national charity? Yes No If yes, Union Bank may not consider request
Are you a customer of Union Bank? Yes No

Mission Statement of your Organization:

Tell us about your activities:

- Healthcare and human service programs
Education
Job development
Housing
Programs for at-risk youth or low to moderate income individuals and families
Performing arts and cultural activities
Environmental and preservation programs
Other :

Geographic region(s) served:

- Chittenden County
Lamoille County
Orleans County
Washington County
Caledonia County
Coos County
Grafton County
Statewide (Vermont)

Please list any Union Bank employees or directors who volunteer for your organization:

**Tell us about the requested donation**

Name and description of the program or project for which you are requesting funding:

Amount of Request: \$	Number of People Served: .	Age Group (youth, seniors, etc.) Served:
Annual Budget of your Organization: \$	% of Total Expense Used for Program Activities: %	% of Donation Used to Directly Benefit Organization: %

List other organizations with which you are collaborating on this program or project:

How will your organization measure success for this program or project?

How will Union Bank be recognized for this donation?

Key Dates:

Date of event/program:

Date by which funds need to be received:

Date by which artwork, logo or banner needs to be received:

**We will not consider your application without the following items. Please do not include marketing materials. Note that we may request further information in support of your request.**

**All Donations:**

- Proof of 501(c)3 classification from IRS
- List of Board of Directors or Trustees

**Donations of 500 and up (in addition to the above):**

- Projected budget for program or project, showing sources of funding and expenses

**Donations of 1,000 and up (in addition to the above):**

- Income Statement and Balance Sheet for most recent year

\_\_\_\_\_  
Signature - Name

\_\_\_\_\_  
Date

**Please send your completed application to:**

Union Bank, Attn: Charitable Gift Requests, P.O. Box 667, Morrisville, VT 05661. Phone: (802) 888-6600

**FOR OFFICE USE ONLY:**

Date Received: \_\_\_\_\_ Approved? \_\_\_ Yes \_\_\_ No Date of Decision: \_\_\_\_\_

Amount Approved/Initials: \_\_\_\_\_ Date Letter Sent: \_\_\_\_\_