

Signature

of

Request for Donation

Highpoint Community Bank believes in giving back to the communities we serve. We focus our charitable giving on programs that support low-and-moderate income individuals, serve our area youth, and build strong communities.

Name of organization:			
501(C) (3) non-profit tax-exempt organization: Yes No Mailing address: City, State, Zip: Contact Person:			
		Phone Number: E-	-mail address:
		Check should be made payable to:	
		Describe what the request is for:	
Date when the money is needed:Amo	unt requested:		
Have we supported this event in the past? Yes	No If Yes, when / amount		
How will this contribution be recognized?			
Logo required: Yes No			
ColorB&WSize and format required:			
Does the organization have an account relationship with our l	bank?YesNo		
Are you aware of any current Highpoint Community Bank em	ployee / director involvement in the organization?		
What are the benefits to our community if this request is appr Feel free to attach any supporting documents.	oved? How is success measured in your organization?		
Does your organizationYesNo or this program/event income individuals, families, or geographies?	_YesNo offer services directed to low- and moderate-		
If you answered YES to any part of the previous question, ple your mission statement with your request.	ease answer the following questions and provide a copy		
a) What % of people served are in the low- to moderate-incor	ne bracket? %		
b) We never want to compromise the privacy of those being s	served, but please describe how you determine the % of		
people served			
	For Bank Use Only: Approved: Yes No By Amount:		

Follow-up: ___

Date