



What do you see?

### Charitable Donation Request Form

## Tell Us About Your Organization

Organization Name: \_\_\_\_\_

Address (Street/City/State/Zip): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Website Address: \_\_\_\_\_ Email Address: \_\_\_\_\_

Tax Identification Number \_\_\_\_\_

Name and Title of Contact Person: \_\_\_\_\_

Address (Street/City/State/Zip): \_\_\_\_\_

Phone Number: \_\_\_\_\_ Fax Number: \_\_\_\_\_

Email Address: \_\_\_\_\_

Is the organization:

- A 501(c)3 organization?  Yes  No (If no, Dean Bank cannot consider request)
- A local chapter of a national charity?  Yes  No
- A customer of Dean Bank?  Yes  No

Mission Statement of the Organization: \_\_\_\_\_

\_\_\_\_\_

#### Organization's Activities Focus On:

- Youth athletics and development
- Religious services
- 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 \_\_\_\_\_

<b>FOR OFFICE USE ONLY:</b>
Date Received: _____
Date Approved/Declined: _____
Amount Approved/Initials: _____
Date Letter Sent: _____

List any Dean Bank employees who volunteer for the organization.

\_\_\_\_\_

## Please Tell Us About the Requested Donation

Name and brief description of the program or project for which you are requesting funding and how the community will benefit from it:

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Amount  
of request: \_\_\_\_\_

# of people  
directly benefiting: \_\_\_\_\_

Age group (youth, seniors, etc.)  
served: \_\_\_\_\_

Amount of annual  
budget: \_\_\_\_\_

% of \$ received going towards  
fundraising & administrative costs: \_\_\_\_\_

% of \$ received going towards  
program beneficiaries: \_\_\_\_\_

Will Dean Bank be recognized for this donation? If so, how?

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### Key Information:

Date of event/program: \_\_\_\_\_

Date by which funds need to be received: \_\_\_\_\_

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

Where to send or e-mail artwork, logo or banner to? \_\_\_\_\_

### Your application will not be considered without the following items:

- Copy of 501(c)3 classification from IRS
- Projected budget for program or project, showing sources of funding and expenses

**Please allow Dean Bank at least two weeks to process your request.  
If approved, you will receive your funding check by mail, unless  
requested otherwise.**

Please mail request to:

Dean Bank

Attn: Hailey Violette

P.O. Box 307

Franklin, MA 02038

or fax to

(508) 541-5687

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Signature of Applicant

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Date