



VIRGINIA PARTNERS BANK®
MARYLAND PARTNERS BANK®
 (A Division of Virginia Partners Bank)

In order for Virginia Partners Bank/Maryland Partners Bank to provide a decision with your donation request, this form must be completed and signed by someone within the organization making the request. Incomplete forms will not be considered for donations or may be returned for completion. Approved donations will be mailed.

Date of Request: _____ Date Request Needed By (Requires At Least 30 Days Notice): _____

Name of Organization or Event: _____

Organization's Federal Tax ID#: _____

Organization's Main Office Address: _____

Organization's Main Phone#: _____ Primary Contact Person: _____

Does this Organization Already Bank with Virginia Partners Bank/Maryland Partners Bank?

Yes, Deposit Accounts

No Deposit Accounts

Yes, Loans

No Loans

Contact Name: _____ Contact Name's Phone#: _____

Contact Address: _____

Do you personally bank with Virginia Partners Bank/Maryland Partners Bank? Yes No

Specific address of where these requested funds would be used if granted (street, city, state, zip code): _____

Organization's web address: _____

Purpose of funding needs:

If you are requesting door prizes or goody bag items, please indicate how many items - or dollar value of items - you are requesting. _____

If approved, your items will be shipped (no P.O. boxes allowed).

By submitting this donation request form and signing below, I also grant Virginia Partners Bank/Maryland Partners Bank permission to contact the organization or myself personally regarding our banking needs.

Request submitted by: _____ Contact name: _____

(Signature) _____ Date: _____

****Please submit your form to any of our branches.****