

Donation Request Form

In order for Heritage 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. Return this completed form and supporting documents to donations@heritagebankna.com or Donations, 505 5th St., Suite 100, Sioux City, IA 51101.

Date of Request: _____ Date Request Needed By: _____

Name of Organization: _____

Event: _____ Event Date: _____

Organization's Federal Tax ID #: _____

Organization's web address: _____

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

Contact's Email Address: _____

Mailing Address where these requested funds would be sent if granted:

Physical Address of where these requested funds would be used if granted (street, city, state, zip code):

Purpose of funding needs: _____

If Heritage Bank volunteers are being requested, please indicate how many, for what time, and for what purpose:

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

Questions 1-5

1. What is the dollar amount you are requesting? _____

2. What percentage of this donation will go directly to the cause? _____

3. Please mark the box if the primary purpose of this request will benefit:

- Affordable housing primarily benefiting low or moderate-income individuals
- Community services primarily benefiting low or moderate-income individuals or geographical areas
- Activities that revitalize or stabilize low or moderate-income geographies by: _____
- Donation helps a federally declared disaster area by: _____
- Other. The requested donation will be used for: _____

4. What are the income guidelines used by your organization for low or moderate income? *This information will remain confidential and will only be used by Heritage Bank for documentation of Heritage Bank's efforts to meet Federal Regulatory requirements under the Community Reinvestment Act (CRA).*

5. Where does this donation benefit? Select the area(s) that this investment benefits. Check all that apply.

- Buena Vista County IA Calhoun County IA Cherokee County IA Chippewa County MN
- Ida County IA Kandiyohi County MN Minnehaha County SD Sac County IA
- Swift County MN Woodbury County IA Other: _____

Request submitted by: _____ Date: _____
(Signature)

Print Name: _____

Title: _____