## Donation/Sponsorship Request Form



KEMBA Financial Credit Union is committed to supporting the communities and individuals in which we serve by empowering people to become financially self-sufficient and improve their overall well-being. We have a long history of giving back to the community and, as a cooperative, continually seek opportunities to partner with organizations that provide such services within in the communities we serve: Delaware, Fairfield, Franklin, Hocking, Knox, Licking, Logan, Madison, Marion, Morrow, Perry, Pickaway, Ross, and Union Counties. For consideration of KEMBA's support, please complete the following form and submit at least **6 weeks prior** to the date in which the event/program begins.

Please email your completed form to **marketing@kemba.org**, and feel free to reach out with any questions.

<b>General Information</b>						
Date of Request	Date Request Needed		□ Event □ On-going Program			
Person Making the Request	Name of	of Group or Organization				
Title	Email		Phone			
Street Address	City		State	Zip		
What is your organization's primary purpose/mission?						
Who does your organization serve?		What community(ies) do support?	Vhat community(ies) does your organization upport?			
Is your group or organization a 501 © (3) nonprofit? If Yes, please provide TIN:						
Is your group or organization a member o otherwise affiliated with KEMBA Financial Union?		Are any KEMBA Financia employees involved with organization? If Yes, plea	your gro			

Details of Event or Program(s):						
What is the purpose of your request/name of event or program?						
Location of Event(s)/Programs(s)	Target Audience for Event(s)/Programs(s)					
Monetary Amount Requested	Are there other banks/credit unions participating?			□ Yes □ No		
*Please be sure to include documentation supporting your request such as a proposal, flyer, event program, etc. about the organization or event.						
Financial Information:						
Annual Organization Budget:						
Budget for the Event or Program:						
Major Source of Funding:						
Top 3 Corporate and/or Foundation Donors:						
What amount of this project has been secured as of the date of this form?						
Advertising Information:	Volunteer Opportunity:					
Will there be any advertisement or publicing KEMBA Financial Credit Union? If Yes, plea	, ,	Are there oppo If Yes, please de	pportunities for volunteers? se describe:			
INTERNAL USE ONLY:						
Date Received by KEMBA Financial Credit Union			Approved?	□ Yes □ No		
Approved by Marketing Department:						
Amount:	Date Submitted to Accounting:					
Special Instructions:						