



Each year, Solutions Bank receives hundreds of requests for cash donations.

Unfortunately, not all requests can be honored. In an effort to help us learn about your organization, and make sure your request receives the attention it deserves, we ask that you take a few minutes to provide some essential information.

Please return this completed form (preferably at least 30 days before the funds are needed) to one of the following individuals:

Jolene Bohnsack, Solutions Bank, 996 W. Fairview Rd., Freeport, IL 61032 jbohnsack@solutions.bank

Susan Engelkens, Solutions Bank, 200 Main St., PO Box 278, Forreston, IL 61030 sengelkens@solutions.bank

Robert Johns, Solutions Bank, 109 N. State St., PO Box 280, Poplar Grove, IL 61065 rjohns@solutions.bank

Please attach an event flier or other printed information that will help us better understand your request.

We will review your request and let you know our decision as soon as possible.

Your Organization's Name: _____

Contact Person: _____

Is this organization a 501c3 ? yes no

Does this organization have a W9 ? yes no ***If yes, please provide W9 with this form.*

Street address: _____ City: _____

ST: __ ZIP: _____ Phone: _____ Email: _____

Amount Requested? \$ _____ Date donation needed: _____

Briefly describe how this donation will be used to benefit your organization. _____

Please estimate how many local individuals your organization serves _____

What are the benefits to our community if this donation is approved? _____

Will making this donation include advertising opportunities for Solutions Bank? If so, what are they, and will you need a file of our logo or any other information?

Has your organization received donations from our bank in the past? Explain.

Is your organization, or key individuals associated with it, a customer of Solutions Bank?

Other information that you believe will help us as we consider your request: _____

Submitted by: _____ Date _____

For internal use.

Approved by: _____ Date _____

Amount Approved: _____