



Community Support Request Form

Sponsorship – Donation – Advertising - Gift

Organization Information			
Organization's Name			
Address:			
Telephone:	City:	St:	Zip:
IRS recognized nonprofit Y ____ N ____	United Way Agency Y ____ N ____		
Area served:			
Contact Name:		Contact phone:	
Does the organization fund/sponsor other non-profits? If so, which ones			
General purpose of the organization:		Bank Customer Y ____ N ____ Type of account(s):	
Details of Request			
Brief description of request:			
Requested support:		Date needed:	
Check payable to:	Venue/location:	Attendance:	
Other sponsors:			
Benefits to organization if approved?			
Benefits to bank if approved?			
Will bank receive any publicity? Y ____ N ____ If yes, what form?			
Has the bank supported this request in past? Y ____ N ____ When: If yes and an ad, please provide copy of previous ad.			
Other information you would like to provide?		Signature/date:	
Internal Use Only			
Branch/Dept:	Endorsed by:	Send check to:	
Relationship:		Approval/Date:	

Thank you for completing this application. Please submit it to your local Charlotte State Bank & Trust branch office or mail it to:
Charlotte State Bank & Trust, Attn: Marketing Department, 1100 Tamiami Trail, Port Charlotte, FL 33953.
Only completed applications will be considered. Please refer to the Charlotte State Bank & Trust Community Support Policy on our website to determine if your request meets our criteria.