



Attention: This form must be completed for all requests of \$50 or more. Requests should be submitted 30 days in advance. Insure that all * and ** information is included – use back if needed

112 West King Street
Strasburg, VA 22657
www.fbvirginia.com
(540) 465-9121
FAX: (540) 465-5946

Request for o Gift o Donation o Sponsorship (please check one)

Name of individual/organization: _____

Tax ID number or SS #: _____

501(C) (3) non-profit tax-exempt organization: [] Yes [] No

Mailing address: _____

City, State, Zip: _____

Telephone/Fax number: _____

E-mail address: _____

Contact person: _____

Who should check be made out to: _____

Describe what the request is for: _____

*Date when the money is needed: _____ Amount requested: _____

Have we supported this event previously? [] Yes [] No If Yes, when/amount _____

Do you and/or your organization have an account relationship with our bank? [] Yes [] No

If yes, what type of accounts? [] Checking [] Savings [] Money Market [] Loan [] Investments [] CD [] Other

Do you have any affiliation to the organization? [] Yes [] No If yes, provide description: _____

**Required for Non-First Bank customers:
With who do you or your organization bank? _____
Is your bank supporting this request? [] Yes [] No If Yes Amount: _____

What are the benefits to the individual/organization if this request is approved?

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

What are the benefits to First Bank if this request is approved?

Signature _____ Date _____

For Bank Use Only:
Approved: Yes No By _____ Amount: _____
Follow-up: _____
Region: _____ Relationship: _____

*Please return this completed request thirty (30) days in advance to: Marketing@fbvirginia.com or Marketing, c/o First Bank, 112 West King St., Strasburg, VA 22657 or fax to 540/465-5946. Questions? 540/465-9121