

Charitable Giving Request Form

Applicant Details Date of Request Name of Person Making Request Name of Organization Contact Telephone Number **Email Address** Website Address or Facebook Page **Request Details** Date of Event Where is Event Being Held? Dollar Amount Requested / Number of Volunteers Needed How will funds be used? Please describe donor/sponsor acknowledgement Please describe your banking relationship with The State Bank Group

Are any employees of The State Bank Group involved in this effort / organization? Please list.