



Member FDIC

Donation Application Form

Tell Us About Your Organization:

Organization Name: _____

Name of Individual Completing Form: _____

Executive Director or Board President: _____

Address: _____

Phone Number: _____

Website Address: _____ Email Address _____

Organization's Mission Statement:

Is the Organization:

A Non Profit Organization? Yes No (if no, MSB cannot consider request)

A customer of MSB? Yes No

Organization's Mission Focuses On:

- Education
- Economic Development and Job Creation
- Housing
- Culture and Arts
- Health and Wellness in the Community
- Environmental and Preservation of Natural Resources
- Other:

Geographic Region(s) Served:

- Aroostook County
- Washington County
- Hancock County
- Penobscot County
- Knox County
- Statewide (Maine)

Tell Us About Your Requested Donation:

Name and brief description of the program or project for which you are requesting funding:

Amount of Request: _____

Number of People Served: _____

Age Group (youth, senior, etc.) Served: _____

Will this contribution benefit low-moderate income families and/or individuals? If so, explain:

How will Machias Savings Bank be recognized for this donation?

Key Dates:

Date of Event: _____

Date by which artwork, logo or banner needs to be received: _____

Make checks payable to: _____

Signature

Date

Please allow up to four weeks to process.

Send completed form to:
Machias Savings Bank
Attn: Marketing
P.O. Box 318
Machias, ME 04654