

# Donation/Sponsorship Request Form



Submit to:  
**Donations Committee**  
 3344 Metairie Road  
 Metairie, LA 70001  
 Phone: (504) 834-6330  
 Fax: (504) 832-2901

Metairie Bank asks that all organizations requesting financial support from us complete this questionnaire. We ask that your request be submitted at least two months in advance for proper consideration. Those not providing ample time for consideration may limit their opportunity for support. Completion of this form does **NOT** guarantee that Metairie Bank will be able to fulfill the request. Incomplete forms and those without documentation will automatically be denied. (Please print or type.)

Date of Request: \_\_\_\_\_ Person Making Request: \_\_\_\_\_

Organization: \_\_\_\_\_

Physical Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Method (phone, fax, e-mail, cell): \_\_\_\_\_

Documentation needed: Copy of IRS designation letter and copy of IRS Form 990.

1. Is this organization a 501-(c)3 nonprofit agency? **YES NO**
2. If Yes, What is the EIN for the organization? \_\_\_\_\_
3. Is this donation tax deductible? **YES NO**
4. Is this organization a member of United Way? **YES NO**
5. What is the organization's primary mission? \_\_\_\_\_

6. Amount Requested? \$ \_\_\_\_\_ Funds needed by: \_\_\_\_\_

7. Detailed description of how funds will be used. \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

8. Does this organization or this event help low-to-moderate income groups or neighborhoods? **YES NO**

Please describe: \_\_\_\_\_

9. Where will the activity take place? \_\_\_\_\_

10. Will there be any advertisement or promotions featuring MBT? **YES NO**

Please describe: \_\_\_\_\_

11. Have you contacted other MBT offices / employees? **YES NO** If so, list name: \_\_\_\_\_

12. Is the requesting organization a customer of MBT? **YES NO**

13. Are any employees of MBT involved in the effort? Please list. \_\_\_\_\_  
 \_\_\_\_\_

14. Has MBT participated in the past? In what way? \_\_\_\_\_

15. Please attach any supporting flyers or brochures.

16. Signature of Person making request: \_\_\_\_\_