

Northeast Bank's charitable donations support nonprofit organizations in their effort to serve the communities within our footprint. Please refer to the Community Commitments section of our website to learn more about our funding requirements.

Due to the number of applications we receive, we are unable to provide support for every request. Please complete the following application (use additional attachment, if needed) and submit it electronically to CommunityRelations@northeastbank.com with a scanned copy of your organization's W-9 Form and 501c3 letter. Submissions via fax or mail cannot be accepted at this time. Requests are typically reviewed every 30-60 days.

Questions regarding this application or our funding quidelines may be directed to CommunityRelations@northeastbank.com.

Charitable Donation Application

Organization Name:		
Address:	City:	State:
Zip Code:	Primary Phone Number:	
501c3: ☐ Yes ☐ No	Tax ID Number:	
Bank Customer: ☐ Yes ☐ No	United Way Agency:	☐ Yes ☐ No
Website:		
Primary Contact Name:	Primary Contact Title:	
Primary Contact Email:	Primary Contact Phone Number:	
Does the organization fund other nonpr	ofits? If so, which ones?	
Mission Statement:		
Annual Budget:		
Requested Amount:	Date Funds are N	eeded by:
Brief Description of the Program:		
Number of People Served:		
Additional Information:		
Request Acknowledgment The undersigned hereby certifies that a) the informal knowledge; and b) the Internal Revenue Service used for the projects (or event) outlined in the agauthorized representative of the organization na	501(c)(3) determination has not been roplication and agreed to by both partie	evoked, canceled, or modified; and c) funds will be
Signature/Title		