

Donation Request Form

| | Date: |
|--|--|
| While still of worthy cause, please note we generally <i>do not</i> provide financial support to the following: religious or political organizations; individuals; trips or tours; organizations who operate outside of the immediate areas served by LSB; general operational or administrative expenses; fundraising events not associated with a non-profit or cause. | |
| Name of Organization: | |
| Authorized Contact Person: | Ph and/or Email: |
| | vill benefit from this donation? |
| Desired donation – monetary amount or | an item for auction: |
| Has LSB donated before? | Previously donated item or amount: |
| | is donation? If so what: |
| Date the donation is needed by: | Would you prefer □ Direct deposit □ Check |
| Direct deposit account number: | Direct deposit routing number: |
| Address to mail a check to: | |
| Payable to: | May we post about the event on social media? Yes / No |
| Please submit this form via mail, e-mail | , fax or personal delivery at least 10 days prior to the date needed to: |

Mail:

Libertyville Savings Bank Attn: Colby Deao PO Box 68

PO Box 68 Keota, IA 52248 Personal delivery can be made at any of our locations.

E-Mail: cdeao@lsbia.bank