



COMMUNITY GIVING REQUEST FORM

SUMMARY INFORMATION

Date of Request: _____ Amount Requested: _____ Date Needed: _____

Have you received contributions from FNB in the past? YES NO If so, how much: _____

ORGANIZATION INFORMATION

Organization Name: _____

Address: _____ City: _____ State: _____ Zip Code: _____

Contact Person: _____ Phone: _____ Email: _____

REQUEST INFORMATION

Title of Project/Event: _____

Date of Project/Event: _____ Location of Project/Event: _____

Description and Purpose of Project/Event:

Anticipated Benefit to the Community:

Recognition FNB will receive if request is granted:

Number of people who will participate in the project/event: _____

Other supporters of this project/event: _____

SUBMISSION INFORMATION

*****Please submit your request at least 30 days in advance of the date needed*****

Email (preferred)

communitygiving@fnbgillette.com

Mail

First National Bank of Gillette
Community Giving Team
PO Box 3002
Gillette, WY 82717

In-Person

319 South Gillette Avenue (Downtown)
2400 South Douglas Highway (Hwy 59)
520 Running W Drive (RC Ranch)

Include any documents, marketing material, etc. that you would like considered as part of the request.