



417.877.2020

DONATION REQUEST FORM

www.OakStarBank.com

OakStar Bank is proud to support and serve the communities where both our customers and employees live and work. We receive many requests for sponsorships and donations from civic and charitable organizations that benefit our area. We appreciate the opportunity to review your request for support from OakStar Bank. First, please complete the Donation Request Form. Then, send your completed request and any additional information that you see fit to include via email to donations@oakstarbank.com or mail to:

OakStar Bank
Attn: Donations Committee
1020 E Battlefield Rd.
Springfield MO 65807

If you have any questions, please contact us at donations@oakstarbank.com or call (417) 877-2020.

**Please provide your requests at least 30 days in advance of your event date.
Incomplete forms or forms submitted less than 30 days in advance may not be considered.**

ORGANIZATION INFORMATION

Request Date

Date Request Needed (30 Day Min):

Requesting Organization		Website Address	
Mailing Address:			
City	State	Zip	

Primary Contact	Title	Phone Number	Email Address

Organization's Primary Purpose/Mission:	
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Is the organization a 501(c)3 nonprofit agency?	YES	NO
Is the organization a customer of OakStar Bank?	YES	NO



Are any OakStar Bank employees involved with your organization?	YES	NO
If YES, Please list:		
Has OakStar Bank contributed to the requesting organization in the past?	YES	NO
If YES, please provide details:		

REQUEST DETAILS

Please describe your request. For an event, please include date, time, location, event purpose or beneficiary. (Brochures or an information packet are encouraged):

Type of Request:	Monetary Giveaway item(s) Volunteers	Amount Requested: \$ # of items requested: # of Volunteers Requested
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OakStar location closest to where event will take place:	Bolivar Buffalo Camdenton Clinton	Hermitage Joplin Kansas City Macks Creek	Springfield Urbana
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Additional information we may need to know:

ADVERTISING DETAILS

Will OakStar Bank receive any advertising or media promotion?	YES	NO
If YES, please describe:		
Logos needed (include format):		
Email address to send logo to:		

INTERNAL USE ONLY

Submitted By (if employee):		Date:	
Received Via (if mail, email):		Date:	
Date Reviewed:	Approved? YES NO	Date Notified:	
Approved Amount/Items/Volunteers:			



Approved By: _____

Approved By:

Marketing Representative
CCO

CEO, CFO,

FINANCE INSTRUCTIONS

Payee Name & Address		
Amount	Offset GL#	Comment to be printed on Check
\$		
Please forward request to:		Date Check Needed:

