

COMMUNITY GIVING REQUEST

STRONG BANK. STRONG COMMUNITY.



The Federal Home Loan Bank of Des Moines (the Bank) supports building strong communities through community sponsorships, housing program grants, homebuilding initiatives and affordable housing. The funding we provide and the work we do in the community shows our commitment to helping the communities in our district reach their full potential. We welcome the opportunity to partner with your organization. Please review our program criteria and complete the following application.

INTERESTED IN A SPONSORSHIP

The Bank limits our sponsorship efforts to those that align with housing initiatives, financial literacy and education or quality of life improvements in communities where our employees live and work.

Organizations that receive support need to meet one or more of the following criteria:

- Focus on housing initiatives and causes that strengthen the communities we serve within the Bank's district, with a focus on central Iowa and Seattle.
- Help improve financial literacy and education.
- Strengthen under-represented communities and support the Bank's vision of **Strong Bank. Strong Communities.**
- Support cultural diversity in the communities which the Bank serves.
- Request amount of \$10,000 or less

The Bank considers eligibility of requests with civic and charitable organizations that focus serve:

- Transitional housing, shelters, and programs that support services for homeownership and multi-family housing,
- Services that benefit low to moderate income individuals and families,
- Individual self-sufficiency programs and services for single parents,
- Economic development projects,
- Member banks' disaster relief 501(c)(3) funds administered for the benefit of the residents in the affected area (see additional guidelines), and
- Cultural diversity in the communities which the Bank serves.

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ORGANIZATION NAME: _____

ORGANIZATION CONTACT & TELEPHONE: _____

PROJECT NAME: _____

ADDRESS, CITY, STATE, ZIP: _____

WEB ADDRESS: _____

APPLICANT NAME & TELEPHONE: _____

PROVIDE A BRIEF OVERVIEW OF YOUR ORGANIZATION AND ITS MISSION:

PLEASE LIST ANY FHLB DES MOINES EMPLOYEES INVOLVED IN YOUR ORGANIZATION & EXPLAIN THEIR ROLES:

GIVING REQUEST INFORMATION

(CHECK ALL THAT APPLY)

WHAT TYPE OF ENGAGEMENT IS YOUR ORGANIZATION REQUESTING? EVENT SPONSORSHIP ADVERTISING SPONSORSHIP
EXECUTIVE SPEAKING OPPORTUNITY OTHER

AMOUNT REQUESTED: \$ _____ TOTAL PROJECT COST: \$ _____

ARE YOU A UNITED WAY COMMUNITY PARTNER? YES NO

FHLB DES MOINES COMMUNITY FUNDING CRITERIA

To receive support consideration for the request- check one or more of the FHLB Des Moines focus areas that the project/program aligns with:

- Housing initiatives and causes that strengthen the communities we serve.
- Financial literacy and financial education.
- Strengthen under-represented communities and support the Bank's vision of **Strong Bank. Strong Communities.**

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PLEASE LIST DETAILS OF THE EVENT/PROJECT YOU ARE REQUESTING SUPPORT FOR:

WHAT IS THE DATE OF THE EVENT OR CAMPAIGN? _____

IF A TABLE OR CONFERENCE SPONSORSHIP, HOW MANY TICKETS COME WITH THE DONATION? _____

HOW WILL THIS EVENT/PROJECT IMPACT THE COMMUNITY?

WILL FHLB DES MOINES RECEIVE ANY PUBLICITY? YES NO

IF YES, WHO IS YOUR ORGANIZATION'S PUBLICITY CONTACT? _____

HAS THE ORGANIZATION RECEIVED A CONTRIBUTION FROM THE BANK IN THE LAST YEAR? YES NO

IF YES- PLEASE LIST DATE AND AMOUNT: _____

IS THERE ARTWORK OR DESIGN REQUESTED WITH THIS SPONSORSHIP? YES NO

If yes, please attach a description of the artwork or design that is requested (copy, dimensions, color, etc.)

The undersigned certifies that they are authorized to represent the organization applying for a contribution and that the information contained in this application is accurate. The undersigned agrees that if a contribution is awarded to the organization, it will be use for the purposes outlined in this application.

SIGNATURE OF APPLICANT: _____ DATE: _____

FOR BANK USE ONLY

SIGNATURE OF APPROVAL: _____
(EMPLOYEE NAME & TITLE)

AMOUNT APPROVED: _____ DATE: _____

INVOICE RECEIVED DATE INVOICE PROCESSED: _____ SPONSORSHIP CATEGORY: _____