FIRST FEDERAL BANK OF FLORIDA Request for Contribution

Did your organization receive support from First Federal in the past year? Yes No Amount Received: Does your organization consider First Federal as their primary bank? Yes No If no, what would be instrumental for you to allow First Federal to serve your financial needs? Are there any advertising or publicity opportunities with this request? Yes No If yes, the following information is required: Publicity/Advertising Contact Name: Telephone No Contact email address: Deadline for ads/publicity: Ad in program	Name of Organization (Check payable to)	:					
Is your organization a 501(3)(c)?: Yes No If No, does this project have a charitable component?	Address:	_ Ci	ty	Stat	e	Zip Code	
Web Address: Contact Name: Telephone Number: Email Address: Commitment Needed by: Date Funds Needed By: Approximate number of people that will benefit from this project: Which Concentration(s) applies to this request? Well-Rounded Education and Financial Literacy Community Sports Program Community Reinvestment and Development Improving the Health and Welfare of Families Project Title (describe what the donation is for): Did your organization receive support from First Federal in the past year? Yes No Amount Received: Does your organization consider First Federal as their primary bank? Yes No If no, what would be instrumental for you to allow First Federal to serve your financial needs? Are there any advertising or publicity opportunities with this request? Yes No If yes, the following information is required: Publicity/Advertising Contact Name: Ad in program Logo for website Ad in program Logo for website Ad in organization newsletter (electronic or paper format) Logo for banner/sign Logo for banner/sign Logo for paper formatol Logo for paper formatol Logo for program/handout Logo for paners formato Logo for program/handout Logo for hamers formator Please save and email complete	County Federal T	ax ID#					
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