



Alpine Bank Community Matching Grant 2023 Application

Name of Organization: _____

Contact Name: _____

Contact Phone: _____ Email: _____

Mailing Address, City, State, Zip: _____

Type of Non-profit: _____ EIN#: _____

1. Briefly describe your organization, its mission.

2. If your organization is awarded a match by the Non-profit Community Fund, please define how you would utilize the underwriting spots on KVNf. (I.E. Outreach, event related, volunteer recruitment)

3. In what ways do you think receiving this funding will impact your organization as a whole?

4. Please indicate when you would like to use your underwriting spots

5. Matching Fund Amount Requested: \$ _____ (\$200 MIN \$400 MAX)

6. Are you currently an Alpine Bank Customer? (not a requirement to apply)

Please return completed form to Jane Marie Amundson, Alpine Bank
janemarieamundson@alpinebank.com

2023 Application Deadlines:

April 3, 2023

October 2, 2023