

Reset



Community 1st Partnership Application

Name of Organization:	_____	Date:	_____
Address:	_____	Date Established:	_____
City, State, ZIP:	_____	Tax Designation:	_____
Contact Name:	_____	Phone:	_____
Email Address:	_____	Fax:	_____
Website:	_____	Decision Deadline:	_____

Is your organization new to 1st Capital Bank’s Community 1st Partnership Program?

Yes No

1st Capital Bank is committed to continually enhancing the economic vitality and social welfare of our local community through nonprofit corporate sponsorships and a full range of charitable organizations.

Recipients of charitable contributions must provide:

- service within our local markets
- a list of the current Board of Directors
- a copy of their current IRS nonprofit organization 501(c)3 designation letter
- an IRS form W-9

Please include your full request for the current calendar year, as it is our policy to consider and grant one charitable donation per year, per organization. If you are requesting sponsorship for a specific event, please attach event details and sponsorship levels, if applicable. If this event is recurring, please attach copies of past promotional materials for reference.

About your Organization

Please tell us more about your organization including background, Mission Statement, goals, accomplishments, etc. More information may be attached as necessary.

Are any 1st Capital Bank employees currently involved in your organization? Yes No

If yes, please explain: _____

MSA (2022 income)	Median Income	Low Income	Moderate Income	Middle Income	Upper Income
Salinas (Monterey County)	\$90,100	\$0 - \$45,050	\$45,050 - \$72,080	\$72,080 - \$108,120	\$108,120 or greater
San Luis Obispo County	\$109,200	\$0 - \$54,600	\$54,600 - \$87,360	\$87,360 - \$131,040	\$131,040 or greater
Santa Cruz County	\$119,300	\$0 - \$59,650	\$59,650 - \$95,440	\$95,440 - \$143,160	\$143,160 or greater

What percentage of your clients are low to moderate income? Less than 50% 50% or more

Total Number of People Served: _____

- Populations Served:
- | | |
|--|--|
| <input type="checkbox"/> Single Adults | <input type="checkbox"/> Homeless |
| <input type="checkbox"/> Families | <input type="checkbox"/> Low Income |
| <input type="checkbox"/> Youth | <input type="checkbox"/> Moderate Income |
| <input type="checkbox"/> Seniors | <input type="checkbox"/> Other: _____ |

Is your organization involved in any of the following?

- Housing**
- Home Ownership
 - Multi-Family Housing
 - Rental housing (1-4)
 - Transitional Housing
 - Affordable Housing
 - Other (describe below)

- Community Development**
- Small Business Development
 - Job Preparation
 - Financing Assistance
 - Community Services
 - Revitalization of Low to Moderate Income Area
 - Other (describe below)

If other, please describe here: _____

Please return this form to your 1st Capital Bank contact or:

1st Capital Bank
c/o Marketing Department
150 Main Street, Suite 150
Salinas, CA 93901

Fax: 831-264-4001 (attn: Marketing)

Email: marketing@1stcapitalbank.com