CATERPILLAR FINANCIAL SERVICES CORPORATION CORPORATE CONTRIBUTIONS APPLICATION FOR FUNDING

Return application to $\underline{\textbf{Contribution.Requests@cat.com}}$

Organization Name: Address (Street, City, Sta Contact person:	ate, Zip):				
Phone: E-mail: *501c3 Tax I.D.#: Note: If first time applicant or har application.	s never been approv	ved for funding t	pefore - attach o	copy of your organ	ization's W-9 form with
Organization has a profil Note: It is a requirement that an	•		ith Giving Matte	Yes ers to be considere	No ed for a donation.
rganization is a United Way		Partner Agency		Age	ncy N/A
Organization Mission (su	ımmary):				
Organization's non-profit	t category:	Arts	Civic	Education	Health/Human Services
Amount requested: If not monetary – In-Kind	Request or Day	y of Caring (summary of	f needs):	
Funding Purpose and/or	Event Summary	y:			
If funding for an event – onumber of volunteers):	describe event a	and timing (if requesting	g a Day of Car	ing, include desired
Please select the necess	ary Cat Financi	al logo form	at (if no log	o needed, circ	le none)
PNG	JPEG	GIF	None		

If your organization received funds in the prior year you must provide results to reference of the donation (measurement template). If the information is not provided we wis request for this calendar year.		-
Are any Cat Financial employees currently working with your organization: If yes, please list names and in what capacity they serve (board chair, board member, committee member	Yes , volunteer, etc.:	No
Note: The Cat Financial Corporate Contributions Committee meets quarterly (meeting dates subject name on application will be notified (approved or declined) after each meeting. Notifications are massoon as possible after meeting date, we appreciate your patience as we work through the contact literature. Comments:	ade via email or	