

Thank you for your interest in supporting The Burke & Herbert Bank Foundation. Please review our guidelines and submit your application below. Please note, we request your information to assist our team to connect with you about your request for donations.

Does your request comply with the above eligibility requirements?

Yes

If yes, explain:

No

Is your organization a 501(c)(3) non-profit? If so, please include a copy of your IRS Determination Letter with your supporting documents.

Yes

No

Has your organization previously requested funding through the Burke and Herbert Bank Foundation?

Yes

No

YOUR CONTACT

Your Name

Your Role / Title

Email Address

Phone Number

ORGANIZATION INFORMATION

Organization

Executive Director

Tax ID/ EIN (00-0000000)

Website

Address

Address Line 2

City

State

ZIP

Please provide a brief overview, mission, or the purpose of your organization.

Are you an employee of Burke & Herbert Bank or its affiliates?

Yes

No

If yes, please explain:

Does a Burke & Herbert Bank employee or a Burke & Herbert bank affiliate employee serve on a board or committee?

Yes

No

If yes, please list the employee's name title, and role with the organization.

Please list the name(s) of a Burke & Herbert Bank employee who is knowledgeable of your entity's mission and application:

Has Burke & Herbert Bank or any affiliate organization contributed to your organization in the past?

Yes

No

If yes, please provide the details here:

The Burke & Herbert Bank Foundation prioritizes its giving to programs and organizations in the areas of healthcare, housing, hunger, and education. Which focus area does your request align with?

Healthcare

Housing

Hunger

Education

Other If other, please describe:

Geographic area served:

OTHER DETAILS

Type of request:

Capital Campaign Support

General Operating Support

Program / Project Monetary Support

Program / Project Name

Program / Project Date

Amount Requested

Response Required By

If this request supports a project or a program, please provide the program or project details:

- **A brief overview of the program**
- **Number of individuals served**
- **Budget estimate or explanation of how funds will be used**
- **Expected impact of the project or program**

How will you measure the success of this program/ project?

Please email or mail your completed Foundation Request Form and any supporting documents to:

Angela R. Zirk

EVP, Chief Experience Officer - Burke & Herbert Bank

300 N. Main St.

PO Box 179

Moorefield, WV 26836

bhbfoundation@burkeandherbertbank.com

For questions relating to the Burke & Herbert Bank Foundation, please email your inquiry to bhbfoundation@burkeandherbertbank.com