



CBE Companies 'CBE Cares' Program

"Doing the right thing" is an integral part of our culture that not only protects our clients, but also extends outside the office and business hours. Both as a company and individual employees, we focus on providing our time, talents, and financial resources to support local charities and community organizations throughout our Cedar Valley (IA), New Braunfels (TX), and Clarksville (TN) communities. CBE's ideal candidates seek to benefit human need, align with our Core Values, and demonstrate fiscal responsibility.

'CBE Cares' (previously known as 'Casual for a Cause') is one of CBE's philanthropic initiatives where employees donate money to local charities and non-profit organizations. Participating employees are entered into a monthly drawing for a chance to win 1 of 10 Mental Health Days (paid time off); winners can forfeit their Mental Health Day in favor of drawing another employee's name or donate their Mental Health Day to another employee. Every year CBE will award a total 120 days of paid time off to selected employees.

We are now accepting applications for our charitable and non-profit organizations. If your organization is interested in joining CBE's list of local charitable and non-profit recipients, please complete and submit this application.

Organizations that will be considered for funding:

- ▶ A tax-exempt, non-profit entity, classified by the IRS as 501(c)3
- ▶ Maintains a physical presence and address in the:
 - ✓ State of Iowa; preferably in the Cedar Valley
 - ✓ State of Texas; preferably in the New Braunfels area
 - ✓ State of Tennessee; preferably in the Clarksville area
- ▶ Provides proof of how these funds will demonstrate an impact to the community
- ▶ Submits the CBE Cares Application by the deadline, completed by an employee, board member, or volunteer of the organization

CBE Cares will not consider requests:

- ▶ That benefit a specific religious organization
- ▶ For sporting events or athletic teams
- ▶ Political groups
- ▶ Specific fundraisers (golf outings, 5Ks, galas)
- ▶ Animal care/salvation organizations
- ▶ School fundraisers
- ▶ Trade associations
- ▶ That benefit a specific family or individual

Please return completed application and required documentation to:

- ▶ Amanda Gantois
CBE Companies
1309 Technology Parkway
Cedar Falls, IA 50613
- ▶ Email questions to: Amanda.Gantois@cbecompanies.com

CBE Companies CBE Cares Application

Organization/Agency Name: _____

Address: _____ City: _____ State: _____ Zip: _____

Executive Director: _____ Website: _____

Contact Person and Title: _____

Telephone: _____ Fax: _____ E-mail: _____

Type of need:

- | | | |
|---|--|--|
| <input type="checkbox"/> General Operations Support | <input type="checkbox"/> Ongoing Support | <input type="checkbox"/> Equipment/Materials |
| <input type="checkbox"/> New Program/Project | <input type="checkbox"/> Capital | <input type="checkbox"/> Other |

Organization:

1. Please specify if your organization is a tax-exempt, non-profit entity (classified by the IRS as 501(c)(3):
☐ Yes ☐ No **(Please provide with your application a copy of your 501(c) 3 tax status)**

2. Please specify how long your organization has existed: _____

Note: If your organization was recently formed (less than 2 years) we will require a copy of a W-9 as part of the review process (must be attached to this application).

3. Please specify which category you would classify your organization:

- ☐ Arts & Culture **(theater, music, painting, sculpture, dance, local museums, libraries, etc.)**
- ☐ Education **(public or private institution of learning)**
- ☐ Health **(institution dedicated to healing and wholeness of life through improvement of health care, prevention of substance abuse, etc.)**
- ☐ Human Services **(assisting youth, women, minorities, the elderly, economically or physically disadvantaged people, families in need, etc.)**

8. **For Iowa Applicants only:** CBE Cares comes with volunteer support for our quarterly recipient during the month they receive their donation; what projects, events, or supports could your organization use help with? In other words, how can we help you?

Signature of the Submitter: _____
Name Date