



PFCU Donation Request Form

Date of Request: _____

NOTE: Requests must be submitted at least 30 days in advance of the event date.

Please print this form, complete and mail or e-mail to:

Attn: Community Relations, 9077 Charlotte Highway, Portland, MI 48875: Marketing@pfcu4me.com

Group/Organization: _____

Purpose of Request: _____

Contact Person's Name/Title: _____

E-Mail: _____ Phone: _____

Date of your event: _____ Previous PFCU donation amount _____

Description of Request:

How will the organization recognize PFCU's support (ex: media, newsletters, banners, etc.):

If request approved: *(Cannot be made payable to an individual)*

Make check payable to: _____

Mail payment to: _____

Thank you for considering PFCU as a community partner. If you have any questions or concerns please contact us at marketing@pfcu4me.com

FOR CREDIT UNION USE ONLY:			Date: _____
Approved	Denied	Amended	
Action Taken: _____			

Credit Union Signature: _____			