

DONATION REQUEST FORM

494 EAST MAIN ST. MALONE, NY 12953

TruNorthern Federal Credit Union is committed to our Members and the communities in the four northernmost counties in New York State. It has been our pleasure to support various causes in the North Country and to give back to our neighbors.

Name of Organization/Group: _____

Contact Person: _____ Phone Number: _____

Email: _____

Mailing Address: _____

Describe the purpose of your group: _____

Donation Requested: _____ Date Needed: _____

Please describe the purpose of your donation (event, auction, etc.): _____

How will our donations be used? _____

Is your group or contact person a member of TruNorthern? _____

Has TruNorthern provided a donation in the past? _____

If yes, what was donated and when? _____

The above information is correct, and should the donation be approved, I will use the donation for the purposes listed above.

Date: _____ Signature: _____

Please return to TruNorthern Federal Credit Union thirty (30) days prior to your event date:

Mail: 494 East Main St. Malone, NY 12953

Fax: 518-483-8808

Email: jtracy@trunorthernfcu.org

Checks payable to: _____

**A request for a donation does not guarantee funding.*



(518) 483-8668