

Community Support Request Form



Organization Name: _____

Donation Due Date: _____ Amount Requested: _____

Contact Information

Name: _____

Address: _____

Phone: _____ Email: _____

Organization's Mission and History (How it benefits the community): _____

Proof of 501c3 status or non-profit status (may be attached): _____

Describe any relationship the organization has with LCU: _____

How will the donation serve the community? _____

In general, who will be helped by the donation? (do not provide individual names) _____

Is there recognition opportunity for LCU? (press release, advertisement, banner, naming rights, other - describe)

In some cases, the organization's budget, financial statement, and sources of other funding may be requested.

Advertisement and/or banner specifications Due date: _____ ad banner

Size of ad: width _____ height _____ Size of banner: width _____ height _____

full color black and white Ad use: print web

File format: pdf jpeg tiff other: _____

Contact information (where to send the ad, or if questions arise):

Name: _____ Email: _____ Phone: _____

Request for other items (gifts, giveaways)

Description of request: _____ Quantity: _____ Due date: _____

Submit the completed request form to:

Leominster Credit Union - Attn: Marketing
20 Adams Street • Leominster, MA 01453

Or email to marketing@leominstercu.com. Include *Community Support Request* in the subject line.

Additional information regarding details of the request should be submitted along with this document.



Equal
Opportunity
Lender