

Donation Application

Name of Organization: _____

Contact Name: _____ Phone Number: _____

Email Address: _____

Street Address: _____

City: _____ State: _____ Zip Code _____

Website Address _____

EIN No. _____

Is Your Organization an IRS qualified 501(c)3? Yes ___ No ___

Do you have an account with PFCU? If not, how did you become aware of this program? _____

Amount of the donation that you are requesting: \$_____

Please provide some background about your organization and how the funds will be used. Include any documentation that you may want us to consider.

Email your completed application to CDA@mypfcu.org.

www.mypfcu.org ☎ 847.MYPFCU1 / 847.697.3281

📍 Barrington

📍 Des Plaines

📍 Evanston

📍 Franklin Park

📍 River Grove /Triton College Bldg C

📍 Glenview

📍 Morton Grove