



Donation or Sponsorship Request Form

Complete and Fax, Mail or Hand Deliver to:
East Texas Professional Credit Union
Attn: Marketing
409 E. Loop 281 • PO Box 6750
Longview, TX 75608 • Fax: (903) 323-0212

Today's Date:	
Date Sponsorship or Donation is Needed:	
Name of Event or Organization:	
Contact Person:	Phone Number:
Email:	Mailing Address:

This request is a: Donation Sponsorship

Please give a brief description of your organization or event's goal, including who it will benefit:

Describe in detail the dollar amount of the donation being requested and or the number and type of items needed for your event:

Please attach any supporting documents that you feel would assist the Credit Union with the decision making process.

Give a detailed list of the recognition that the Credit Union can expect to receive from the donation requested.

To your knowledge, has the Credit Union previously donated to your event or cause? _____

Will you be able to provide a receipt for items or monies donated? _____

For ETPCU Use Only Employee _____ GL# _____
Approved <input type="checkbox"/> Denied <input type="checkbox"/> Amount or Item(s) _____

