



Members Advantage Community Credit Union Donation Request Form

Here at MACCU, we believe that giving back to the community is an essential part of our business. We want to support organizations that help better the community in which we are all a part of.

To ensure that your request is processed in a timely fashion, please allow at least TWO weeks notice.

Name of Organization: _____

Contact Name: _____ Role in Organization: _____

Contact Phone: _____ Contact Email: _____

Brief description of organization's mission:

Date of Event: _____ Date Donation Needed: _____

Name of Beneficiary: _____

Donation Request: _____

Brief summary of how donation would be used:

Solicitor: _____

Address: _____ City/State: _____

Contact Phone: _____ Contact Email: _____

Please mail completed forms to:
Members Advantage Community Credit Union
Attention: Lori Crowley
P.O. Box 9491
South Burlington, VT 05407
lcrowley@maccu.org