

American 1 Credit Union
Attn: Event Coordinator
718 E. Michigan Ave., Jackson, MI 49201

Phone: 517-783-9249 Fax: (888) 875-9628
Email: community@a1cu.org



DONATION REQUEST FORM

Organization: _____ Date: ____/____/____

Contact Person: _____ Title: _____

Address: _____ City/ST/Zip: _____

Phone: (____) _____ - _____ Email: _____

Description of organization/event (include **date of event** and location or attach a flyer for your event): _____

Number of people attending event: _____ General Request Special Event Request

Information in this box is REQUIRED for donation request to be considered.

Employer Identification Number (EIN): _____ - _____ OR

Taxpayer Identification Number (TIN): _____ - _____

This organization is a: 501(c)3 501(c)4 Other _____

If monetary donation is requested, the ID above must match the organization to which the check is being written as a donation.

Type of Requested Donation(s):

Monetary/Sponsorship: \$ _____ Specify: _____

Bottled Water: Number of Cases _____ (24 per Case with a 5 Case Max per event)

Gift Cards: Amount: _____ Quantity: _____ Type: _____

Promotional Items: Circle requested item(s) Golf Tees Pens Key Chains Magnets Any Quantity: _____

Donation pick up days are Tuesdays and Thursdays

Requested day/time frame: Tuesday Thursday AM PM We will call/email to confirm the date and time.

If you are going to be late or can't make your scheduled pick up day/time, please call/email as soon as possible.

No call/no shows may be subject to having future donation requests denied.

Water/golf tee pick up: Pick up is at the Community Co-op on 810 W Argyle St., Jackson, MI 49202. Please ring the doorbell.

For American 1 Use Only:

Approved Declined Explanation: _____

Signature/Title of Reviewer: _____ Date: ____/____/____

Pick up Scheduled: Day: _____ Time: _____

Pick up complete They called/Emailed to reschedule No Call/No Show on 1st scheduled time