



Florida State Employees Federal Credit Union

Advertising/Sponsorship Request Form

I. Requesting Organization Information

Today's Date	
Name of Organization	
Contact Person & Title	
Address	
City	
State	
ZIP Code	
Phone	
Fax	
Email	
Brief Overview of Organization: (100 words or less)	

Are you or is your organization a member of Florida State Employees Federal Credit Union?

_____ **YES** _____ **NO**

Is your organization a Non-Profit Organization?

_____ **YES** _____ **NO** **If yes, Tax ID #:** _____

II. Event Information

Name of Event/Project	
Date(s) of Event/Project	
Deadline for Funding	
Contact Person & Title	
Location Address	
Location City	
Location State	
Location ZIP Code	
Brief Overview of Event/Project: <i>(100 words or less)</i>	

III. Recognition

How will Florida State Employees Federal Credit Union be Recognized for the monetary and/or items contribution, or volunteer hours?	
Is this an advertising/promotional opportunity for Florida State Employees Federal Credit Union?	<input type="checkbox"/> YES <input type="checkbox"/> No
If yes, please describe how the logo and/or name will be used:	
Logo Size/Format Requested:	

IV. Monetary Request

Please fill this section out for Monetary Requests

Dollar Amount Requested	\$
Check Payable To <i>Checks must be made payable to organizations, individuals will not be accepted.</i>	
Mailing Address <i>(if different than Section I.)</i>	

V. Item(s) Request

Please fill this section out for Item Requests

Item(s) Requested and Quantity:
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VI. Volunteer Request

Please fill this section out for Volunteer Requests

Number of Volunteers Requested	
Number of Hours Requested	

Credit Union Use Only

Application Receipt Date: _____

Application Review Date: _____

Decision: _____

Comments: _____
