



# Illinois

Credit Union Foundation

## ICU Foundation Commemorative Donation Form

Select one:     Memorial (person has passed away)  
                   Tribute (person is alive)

Name of person being honored: \_\_\_\_\_

Please provide name of person being honored or an appropriate family member as well as an address where notification of your gift can be sent:

Name                    \_\_\_\_\_  
Address                \_\_\_\_\_  
City/St/Zip            \_\_\_\_\_

Amount Enclosed:    \$ \_\_\_\_\_

Is this award intended to be a surprise?    Yes    No

In the space below, please provide information regarding why the person is being honored:

Donation from:

Name                    \_\_\_\_\_  
Credit Union           \_\_\_\_\_  
Address                \_\_\_\_\_  
City/St/Zip            \_\_\_\_\_

**Send to: ICU Foundation, PO Box 3107, Naperville, IL 60566-7107**