



Chinmaya Mission Twin Cities

12575 County Road 43, Chaska MN 55318

Ph: 952-368-6000

www.chinmaya-twincities.org



Mangal Fund (Interest Free Loan Fund)

Member Information (please print)

Name _____
 Street Address _____
 City, State, Zip Code _____
 Telephone _____
 Email _____

Loan Levels

___ \$ 2,500
 ___ \$ 5,000
 ___ \$10,000
 Any Other Amount \$ _____

Loan Duration (Member receives the loan amount back after this duration)

___ 10 Years
 ___ 5 Years
 ___ 3 Years

I (we) plan to make this contribution in the form of: _____ cash, or _____ check
 ___ I/We wish to have our Loan remain anonymous.

NOTE: Loan of \$10,000+ will be returned in two (50% each) installments at the end of the specified period. Other loans will be returned 100% at the end of the loan period.

Signature _____ Date _____

Please make checks payable to: **Chinmaya Mission Twin Cities**