



Event Day and Date: _____

Hosting Organization: _____

Contact Name: _____ 501(c)(3) Number: _____

Email: _____

Phone Number: _____

Mailing Address: _____

City: _____ State: _____ Zip Code: _____

Event Name: _____

Event Description (be specific, the cause, etc.): _____

Items to be used for (silent auction, raffle prize, etc.): _____

*** Your request form must be received at least 1 month prior to the date of your event.**

*** Please type or print clearly and completely.**

Please return this form along with a written request on your organization's letterhead to one of the following:

Email: lindsey@wvpower.com

Mail: West Virginia Power Baseball

Attention: Lindsey Webb

601 Morris Street, Suite 201

Charleston, WV 25301

Fax: 304-344-0083, Attention: Lindsey Webb

Administrative use only:

Date Fulfilled: _____

Donation Request Filled: Yes/No

Donated Item(s): _____

Donated Value: _____

Initials: _____