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Your Touchstone Energy® Cooperative 
The power of human connections

SPONSORSHIP AND DONATION REQUEST FORM

To continually improve the quality of life in the Union County community and for our members, and to track the funds dispersed, standards have been established for the donating or granting of funds or gifts. Please fill in all the information.

Contact _____ Deadline for donation _____

Name of Organization _____

Address _____

City _____ State _____ Zip _____ Phone _____

What is the nature of your organization? _____

- 501 C 3 Organization

DONATION REQUEST:

- Advertising (Please attach advertising size and price specifications. Also, please provide information on what the publication will be used for, the number of copies, and distribution.)
- Auction Item
- Door Prize/Raffle Prize
- Cash Sponsorship
- Giveaways
- Or describe your request _____

Event date: _____ Held Annually? _____

Describe the event: _____

How many people do you estimate will attend? _____

How will your event be promoted? _____

What is your fundraising goal? _____

How will this benefit the community? _____

What benefits or recognition will URE receive as sponsor or donor? _____

- | | |
|--|--|
| <input type="checkbox"/> Sign at event | <input type="checkbox"/> Presence at event |
| <input type="checkbox"/> Campaign/Multiple | <input type="checkbox"/> Announcement |
| <input type="checkbox"/> In Kind Services | <input type="checkbox"/> Ad |
| <input type="checkbox"/> Listed in Event Program | <input type="checkbox"/> Other |

Is your group associated with any employee of URE? If yes, please give employee name and their role in your organization. _____

FOR OFFICE USE ONLY:

Received by _____

Received Date _____

Entered in database # _____

Sent follow-up letter _____

Denied: Reason

Approved:

Donation Description _____ Amount _____

Employee Signature _____ Date _____

Approval Signature _____ Date _____

Send confirmation letter _____

Type of beneficiary:

Agricultural

History/Heritage

Arts

Medical/Wellness

Charitable giving (memorials, etc.)

Seniors

Community Safety/Security

Social Service/Outreach

Economic Development

Youth

Educational

Other

Vendor #	A/P Date		Due Date	A/P Entry Date
Final Approval	Final Approval		Check #	Audited By
Acct	CEC	W/O	Sales Tax	Total Exp.