



NORTH CAROLINA

www.relaync.com

Relay NC
4819 Emperor Blvd
Suite 205
Durham, NC 27703

To Whom It May Concern:

Thank you for your interest in having Relay NC sponsor your event. We strive to maintain collaborative working relationships with organizations and agencies. Being part of this event is a perfect example of joining forces to help promote services to people who are Deaf, Hard of Hearing and Deaf-Blind.

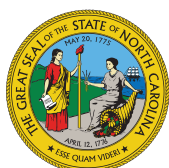
Please read carefully the information of requirements from our agency below. In order to provide the funds, we need specific information to process the request for a check for your event.

Thank you for your time in completing this and we look forward to working with you!

SPONSORSHIP INFORMATION

All sponsorships will be processed via check request. In order to process the check, Relay NC will need the follow information from the organization:

- W-9 form to demonstrate validity of organization/agency.
- Letter of Request with the letterhead/logo of your organization. This letter must include: the event title, purpose of event, how the sponsorship will be used, the amount of sponsorship requested, and how Relay NC will be promoted (booth, presentation, ad or others).
- Once the check request is processed, it will be sent to the address of your organization that is stated on the W-9 form.
- To process the check, we need this request submitted with the information above no later than 6 weeks prior to event of sponsorship. Both the letter and the completed Request for Sponsorship form on the following page must be submitted together to proceed with the check processing.



NC DEPARTMENT OF
**HEALTH AND
HUMAN SERVICES**
Division of Services for the
Deaf and Hard of Hearing

For more information, contact:

Bola Desalu,
Associate Accessibility Relationship Manager
bola.desalu@t-mobile.com



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Relay NC Request For Sponsorship

Name of Organization: _____

Name of Event: _____

Location: _____

Date: _____ Time: _____

Contact Person: _____

Contact: (Email) _____

(Phone/Videophone) _____

Amount Requested: _____

IN EXCHANGE FOR SPONSORSHIP, RELAY NC WILL RECEIVE:

- Booth
- Presentation
- Program Book Advertisement
- Other: _____

Mailing Address: _____

(where a check)
will be sent to _____

FOR OFFICE ONLY

Yes, Relay NC would be proud to support your organization for this upcoming event.
We hereby authorize this sponsorship for the donation amount listed above.

No, we regret to inform that we will not be able to participate in the event this year.