

Directorate of Family and Morale, Welfare and Recreation
Support Services Division
ATTN: Kellie Heim or Tina Angell
Carlisle Barracks, Pennsylvania 17013

Dear

The (Name of private organization) requests permission to conduct a **(Type of Fundraiser)** on **(Date)** at the **(Location)**. Proceeds benefit (Who/What). Point of contact for this request is **(Name and Phone Number—POC)**

(CAN NOT USE OFFICIAL
SIGNATURE BLOCK)