



date:

**Pharmaceutical Company**

Attn: **Representative**

Address

Dear **Representative**:

Marshall University JCE School of Medicine requests a grant from **Pharm Company** to support an independent nonpromotional scientific and educational activity on date.

For: **Activity – Topic– Speaker, MD, Address**

We are requesting a grant in the amount of \$\_**Amount** which we believe will defray the reasonable costs associated with the activity. (See item 1, LOA attached)

We understand that if **Pharm Company** agrees to provide the grant, our institution will be required to sign an Agreement for Support of Educational/Scientific Activities. We further understand that we will have responsibility and complete control over the planning of the activity's content, including the selection of presenters and moderators, although **Pharm Company**, at our request, may provide limited technical or logistical assistance.

We hope that **Pharm Company** will agree to fund this activity. Please make check payable to: **University Physicians & Surgeons, Inc., CME. Tax ID # 55-0564945.**

Sincerely,

***David N. Bailey, MBA or Activity Chairperson***

Assistant Dean

Continuing Medical Education

Marshall University JCE School of Medicine

1600 Medical Center Drive, G407

Huntington, WV 25701-3655

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