



UINTAH BASIN MEDICAL CENTER – BRODY’S FUND  
 Golf Committee  
 250 W 300 N 75-2  
 Roosevelt, UT 84066

To Whom It May Concern:

We invite you to support our annual UBMC Golf Classic supporting Brody's Fund which will be held on **Friday, June 7, 2019** at the Roosevelt City Golf Course in Roosevelt, Utah. This is a highly attended event with a morning and afternoon flight which fills up to full capacity with nearly 300 players each year.

If you would like to register a golf team, please see call 435.823.6269 or email [golf@ubh.org](mailto:golf@ubh.org). The morning flight is full. **In addition, we ask that you kindly consider a sponsorship or raffle donation to support our cause.**

Sponsor levels are available as follows:

<p><b>*Platinum \$2000</b>          Gold Benefits with Premier Recognition, Plus a Free 4-Man Team</p>	<p><b>Gold \$1000</b>          Silver Benefits, Plus Radio &amp; Social Media Mentions</p>	<p><b>Silver \$750</b>          Bronze Benefits, Plus Hole Signage</p>	<p><b>Bronze \$500</b>          Recognition on Player Handout, Banner &amp; in Newspaper</p>
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Raffle items are also greatly appreciated!

We are in need of gift certificates or items to be used in our raffle. During the event, raffle tickets are sold to event attendees, with all proceeds directly benefitting our charitable cause.

**All proceeds will go to “Brody’s Fund”**. *Brody's Fund is established under Uintah Basin Medical Center's 501C-3. (Please see the attached exemption certificate and W-9.)*

**THE STORY OF BRODY’S FUND:**

Two community members experienced watching their son and daughter-in-law struggle when they lost their newborn son as a stillborn. It was after this experience they realized how hard this was both emotionally & financially for young parents who are not only suffering an enormous emotional loss, but who are also responsible for medical and funeral costs. They took action and decided to do something about it. They approached UBMC with the idea of creating “Brody’s Fund”, which is named after their grandson. The fund was set up in November of 2013, and this fund is now providing financial assistance for funeral and medical costs to help those who experience such a loss.



If a mother (in her second or third trimester) delivers in the OB Department at UBMC and a stillbirth or a fetal demise occurs, or if an infant passes away while in our hospital, the staff immediately working with the patient contacts a representative of Brody's Fund. The family then meets with this representative and it is explained to them that a hold has been placed on all medical bills. Also, the representative contacts the chosen mortuary to direct all associated funeral costs directly to the representative of Brody's Fund. When available, funds are distributed up to \$5,000 per case so that the family can properly grieve while lessening the financial stress associated with such a loss.

This fund has been a blessing to 30+ families already. Keep in mind that if funds aren't available, we cannot provide the assistance needed to help these families. We are passionate about Brody's Fund and will continue to strive to raise funds to support such a worthwhile cause. We hope you join us!

Sincerely,

**Maigen Zobell**

Golf Classic Committee Chair  
Uintah Basin Healthcare Director of Marketing/PR  
(435)823-6269  
maigen\_zobell@ubh.org

**Kyson Snow**

Golf Classic Committee  
Uintah Basin Healthcare Marketing Assistant  
(435)725-2071  
Kyson\_snow@ubh.org

**Brianna Banks**

Golf Classic Committee  
Uintah Basin Healthcare Marketing Assistant  
(435)725-7418  
brianna\_banks@ubh.org



**Friday,  
6/7/19**  
Roosevelt City  
Golf Course



**Great Food,  
Payout,  
Prizes & FUN!**

**Morning Flight (FULL)**  
**Registration: 7:00-7:45 AM**  
**Tee Off: 8:00 AM**

*Lunch Begins  
at 12:30*

**Afternoon Flight**  
**Registration: 12:30-1:15 PM**  
**Tee Off: 1:30 PM**

**Tournament Fee: \$400 Per Team**

Includes green fees, cart, food stops, lunch & registration prize.  
Format: 4-Man Scramble

Player Names: Check box for team captain.

HCP (Max Hcp: 18)

Shirt Size  
Womens/Mens S-4X

Preferred Flight Time:

\_\_\_\_\_

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\_\_\_\_\_

AM

PM

(We will contact you if preferred flight time is not available.)

Team Captain Contact Information:

\_\_\_\_\_ Email

\_\_\_\_\_ Phone #

\_\_\_\_\_ Team Captain Mailing Address (For Team Photos)

**Sponsor Fees**

Please support our charity golf classic by becoming a sponsor! All proceeds go to Brody's Fund!

**Platinum \$2000**

Gold Benefits with Premier Recognition, Plus a Free 4-Man Team

**Gold \$1000**

Silver Benefits, Plus Radio & Social Media Mentions

**Silver \$750**

Bronze Benefits, Plus Hole Signage

**Bronze \$500**

Recognition on Handout, Banner & in Newspaper

*Sponsorships should be confirmed by 5/17/19 to guarantee recognition on signage.*

Please mail form & tournament fee (and/or sponsor fee) to:  
Uintah Basin Medical Center - Brody's Fund - ATTN Maigen Zobell  
250 West 300 North 75-2 - Roosevelt, Utah 84066  
Questions? Call (435)823-6269 or email golf@ubh.org



**Brody's Fund**  
UINTAH BASIN MEDICAL CENTER

Friday,  
June 7, 2019



Roosevelt City  
Golf Course

### Sponsor Fees

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**Platinum \$2000**

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Silver Benefits, Plus Radio & Social Media Mentions

**Silver \$750**

Bronze Benefits, Plus Hole Signage

**Bronze \$500**

Recognition on Handout, Banner & in Newspaper

*Sponsorships should be confirmed by 5/17/19 to guarantee recognition on signage.*

### Sponsor Only

Company Name (as you would like it to appear on signage):

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Company Contact Information:

↓ \_\_\_\_\_ ↓  
Contact Name Phone #

↓ \_\_\_\_\_  
Email

↓ \_\_\_\_\_  
Address

Please mail form & tournament fee (and/or sponsor fee) to:  
Uintah Basin Medical Center - Brody's Fund - ATTN Maigen Zobell  
250 West 300 North 75-2 - Roosevelt, Utah 84066  
Questions? Call (435)823-6269 or email [golf@ubh.org](mailto:golf@ubh.org)



# Request for Taxpayer Identification Number and Certification

Give Form to the  
 requester. Do not  
 send to the IRS.

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type.  
 See Specific Instructions on page 3.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. <b>Uintah Basin Medical Center</b>	
2 Business name/disregarded entity name, if different from above	
3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only one of the following seven boxes.  <input type="checkbox"/> Individual/sole proprietor or single-member LLC <input checked="" type="checkbox"/> C Corporation <input type="checkbox"/> S Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____ <small>Note: Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is not disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.</small>  <input type="checkbox"/> Other (see instructions) ▶ _____	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):  Exempt payee code (if any) _____  Exemption from FATCA reporting code (if any) _____  <small>(Applies to accounts maintained outside the U.S.)</small>
5 Address (number, street, and apt. or suite no.) See instructions. <b>250 West 300 North</b>	Requester's name and address (optional)
6 City, state, and ZIP code <b>Roosevelt, Utah 84066</b>	
7 List account number(s) here (optional)	

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Social security number									
or									
Employer identification number									
8	7		0	2	7	6	4	3	5

## Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶ <i>Brent H Hales</i>	Date ▶ 12.4.18
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

### Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*



Utah State Tax Commission • 210 N 1950 W • Salt Lake City, UT 84137

**Exemption Certificate**  
(Sales, Use, Tourism and Motor Vehicle Rental Tax)

**TC-721**  
Rev. 5/17

Name of business or institution claiming exemption (purchaser) Ulntah Basin Medical Center		Telephone number 435-722-4691	
Street address 250 West 300 North	City Roosevelt	State Utah	ZIP Code 84066
Authorized signature <i>Brent H Hales</i>	Name (please print) Brent H Hales	Title CFO	
Name of Seller or Supplier:		Date 7/1/2019	
Sales Tax License Number: 12301298-002 STC		Required for all exemptions marked with an asterisk (*)	

The signer of this certificate MUST check the box showing the basis for which the exemption is being claimed.

**DO NOT SEND THIS CERTIFICATE TO THE TAX COMMISSION**  
Keep it with your records in case of an audit.

For purchases by government, Native American tribes and public schools, use form TC-721G.

**Resale or Re-lease**

I certify I am a dealer in tangible personal property or services that are for resale or re-lease. If I use or consume any tangible personal property or services I purchase tax free for resale, or if my sales are of food, beverages, dairy products and similar confections dispensed from vending machines (see Rule R865-19S-74), I will report and pay sales tax directly to the Tax Commission on my next sales and use tax return.

**Religious or Charitable Institution**

I certify the tangible personal property or services purchased will be used or consumed for essential religious or charitable purposes. **This exemption can only be used on purchases totaling \$1,000 or more, unless the sale is pursuant to a contract between the seller and purchaser.**

**Construction Materials Purchased for Religious and Charitable Organizations**

I certify the construction materials are purchased on behalf of a religious or charitable organization and that they will be installed or converted into real property owned by the religious or charitable organization.

Name of religious or charitable organization: \_\_\_\_\_

Name of project: \_\_\_\_\_

**Machinery and Equipment and Normal Operating Repair or Replacement Parts Used in a Manufacturing Facility, Mining Activity or Web Search Portal or Electronic Payment Service**

I certify the machinery and equipment and normal operating repair or replacement parts have an economic life of three years or more and are for use in a Utah manufacturing facility described in SIC Codes 2000-3999; in a qualifying scrap recycling operation; in a co-generation facility placed in service on or after May 1, 2006; in the operation of a Web search portal by a new or expanding business described in NAICS Code 518112 between July 1, 2010 and June 30, 2014; in the operation of an electronic financial payment service described in NAICS Code 522320; or in a business described in NAICS 212, Mining (except Oil and Gas), or NAICS 213113, Support Activities for Coal Mining, NAICS 213114, Support Activities for Metal Mining, or NAICS 213115, Support Activities for Nonmetallic Minerals (except Fuels) Mining. For a definition of exempt mining equipment, see Utah Code §59-12-104(14).

**Fuels, Gas, Electricity**

I certify all natural gas, electricity, coal, coke, and other fuel purchased will be used for industrial use only and not for residential or commercial purposes.

**Auto, Industrial Gas, or Drilling Equipment Manufacturer**

I certify the machinery, equipment, normal operating or replacement parts are used or consumed in a manufacturing process as described in NAICS 336111 (Automotive Manufacturing), or 325120 (Industrial Gas Manufacturing) to manufacture hydrogen of the 2002 North American Industry Classifications Systems, or by a drilling equipment manufacturer as defined in Utah Code §59-12-102.

**Pollution Control Facility**

I certify our company has been granted a "Certification of Pollution Control Facilities" as provided for by Utah Code §§19-12-101 - 19-12-305 by either the Air Quality Board or the Water Quality Board. I further certify each item of tangible personal property purchased under this exemption is qualifying.

**Steel Mill**

I certify the rolls, rollers, refractory brick, electric motors or other replacement parts will be used in the furnaces, mills or ovens of a steel mill as described in Standard Industrial Classification (SIC) 3312.

**Municipal Energy**

I certify the natural gas or electricity purchased: is for resale; is prohibited from taxation by federal law, the U.S. Constitution, or the Utah Constitution; is for use in compounding or producing taxable energy; is subject to tax under the Motor and Special Fuel Tax Act; is used for a purpose other than as a fuel; is used by an entity exempted by municipal ordinance; or is for use outside a municipality imposing a municipal energy sales and use tax. The normal sales tax exemptions under Utah Code §59-12-104 do not apply to the Municipal Energy Sales and Use Tax.

**Short-term Lodging Consumables**

I certify the tangible personal property is consumable items purchased by a lodging provider as described in Utah Code §59-12-103(1)(i).

**Direct Mail**

I certify I will report and pay the sales tax for direct mail purchases on my next Utah Sales and Use Tax Return.

**Commercial Airlines**

I certify the food and beverages purchased are by a commercial airline for in-flight consumption; or, any parts or equipment purchased are for use in aircraft operated by common carriers in interstate or foreign commerce.