

# BOB'S WISH GLOBES OF HOPE, INC.

Designer bags may be picked up that night

PLEASE COMPLETE AND RETURN

**HONOR OF (NAME):**

**MEMORY OF (NAME):**

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**Contact Person** \_\_\_\_\_

**Phone** \_\_\_\_\_

**Number of bags** \_\_\_\_\_

**Will you be attending the event?**    **Yes** \_\_\_\_\_ **No** \_\_\_\_\_

**Lighting of Heart Bags will be by the Bob's Wish team**

**THANK YOU FOR HELPING US KEEP THE WISH ALIVE WITH YOUR SUPPORT!**

**PLEASE RETURN WITH PAYMENT TO:**

BOB'S WISH GLOBES OF HOPE, INC.

P.O. BOX 4076

WHEELING, WV 26003

**DONATIONS WELCOME**

**ONLY BOB'S WISH BAGS PERMITTED**