



Donation Request

Today's Date:

Event Date:

Organization Name:

Contact Name:

Email:

Telephone:

Address:

City:

State:

Zip Code:

Event Name:

How will your organization utilize donations?

Describe the event/fundraiser the sponsorship is needed for:

Average number of attendance for this event?

How will KanOkla Networks be recognized?

Make check payable to:

Please save and email to: pr@kanokla.com