Attachment A

Sponsorship/Donation Approval Form

Thank you for your interest in donating to the Oklahoma State Department of Education. Your gift will be used for the benefit of Oklahoma public schools. In order to process your gift, please provide the below information:
1. Name, Address & Phone Number of Donor: Orest Fresh Market Followed
2200 W. 15Th. St.
T(\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Edmond, OK 173013
2. Description of the gift/ donation:
Cockies (1000) & Coffee (11b. can)
(3, Value of the gift/donation: (market value): \$_130^\infty\$
C management constraints and confidentialistic and confidential and confid
4. What is your intended purpose or use for this gift?
Math & Science Partnership Day at the Capital Event
February 5, 2013
5. Do you have or are currently seeking to establish a contractual relationship with OSDE? If so, please disclose
the nature of the contractual relationship: N_{\emptyset}
1-14-13 × Suo Martin)
DATE: (Signature and Title of Donor)
*
INTERNAL OSDE USE ONLY
OSDE Received application:
This Application is: Accepted by the State Board of Education on
Rejected by the State Board of Education on
RETURN FORM TO: Oklahoma State Department of Education
RETURN FORM TO: Oklahoma State Department of Education Director of Financial Services
2500 North Lincoln Boulevard, Room 415