

SPONSOR RESPONSE FORM



- \$50,000 Presenting Sponsor
- \$25,000 Title Sponsor
- \$10,000 Masterpiece Sponsor
- \$5,000 Gallery Sponsor

- We are unable to participate as a sponsor but would like to support Okizu with a donation in the amount of \$_____.

COMPANY NAME: _____

CONTACT PERSON: _____

EMAIL ADDRESS: _____

PHONE NUMBER: _____ FAX NUMBER: _____

STREET ADDRESS: _____

CITY, STATE, ZIP: _____

CREDIT CARD #: _____ EXPIRATION: _____ SECURITY CODE: _____

NAME ON CARD: _____

SIGNATURE: _____

- Please charge the credit card listed above
- My check is enclosed
- Please invoice me for the sponsorship

Please make checks payable to: **Okizu**

Send to: **Art Inspiring Hope
Okizu
16 Digital Drive, Suite 130
Novato, CA 94949**

Tickets and tables also available for purchase. Visit www.okizu.org/aih to learn more.

Tel: 415.382.1503 Fax: 415.382.8384 Email: sarah@okizu.org

PLEASE RETAIN ONE COPY OF THIS AGREEMENT FOR YOUR RECORDS

ALL DONATIONS ABOVE AND BEYOND FAIR MARKET VALUE OF GOODS AND SERVICES RECEIVED ARE TAX DEDUCTIBLE. THE FAIR MARKET VALUE OF ONE TABLE FOR TEN PEOPLE IS \$2,000.00. OUR TAX IDENTIFICATION NUMBER IS 68-0291178.