City Manager 212 SW 9th Street Lawton, OK 73505 580-581-3100



Donation Proposal Instructions: Use this form to document donations made to

Primary Contact Name:						
Organization:						
Phone Number:	Alt	ernate Phor	ne:			
Address:						
City:	State:		Zip:			
Email:						
Donation Details						
PURPOSE OF DONATION:						
DESCRIPTION OF ITEM(S) TO BE DONATED:						
QUANTITY OF ITEM(S) TO BE DONATED:						
ESTIMATED MONETARY VALUE: \$						
All donations from a single entity are valued cur \$100 and \$5000 over a calendar year must have donations over \$5000 in a calendar year must b	e City Manage	er approval	before they ca			tween
DONATION APPROVED (\$0-\$100):			TITLE:		DATE:	
CITY MANAGER APPROVED (\$100-\$5000):					DATE:	
CITY COUNCIL APPROVED (OVER \$5000):		DATE OF COUNCIL MEETING:				
,	APPROVED:	YES	NO)	TABLED	
EVIDENCE OF COUNCIL ACTION ATTACHED:		YES				
NOTES:						