

DONATION RECEIPT FORM



CHARLESTON KIX

Non-Profit LLC

TAX EIN #: 81-5014601

CharlestonKix@gmail.com

45 Arabian Dr

Charleston, SC 29407

Donation #:

Donor: _____

Street Address: _____

City: _____ State: _____ Zip: _____

Date of Donation: _____

Donation Amount: _____

Dear Donor,

Thank you for your donation to the Charleston Kix program. This donation will lead to greater opportunities for the children in this community receiving this benefit. Charleston Kix is a non-profit organization and this donation is tax deductible. If you would like to see your donation at work please follow us on social media(s) @CharlestonKix .

Thank you,

Sponsorship Opportunities

\$10,000 Sponsorship

- Your Company logo and/or name integrated with every event name in all in pre- and post-event media campaigns and advertising for two years.
- Recognition on the Charleston Kix website www.CharlestonKix.com
- Logo featured on all event correspondence/marketing materials, social media for two years.
- Full page ad in _____
- Prominent placement of corporate signage for event and recognition.
- 10 tickets to every event held for two years.

\$5,000 Sponsorship

- Recognition on the Charleston Kix website www.CharlestonKix.com
- Logo featured on all event correspondence/marketing materials, social media for two years.
- Recognition in _____.
- Prominent placement of corporate signage for event
- 8 tickets to events for one year.

\$2,500 Sponsorship

- Recognition on the Charleston Kix website www.CharlestonKix.com
- Recognition on all event correspondence, marketing materials, social media of one year.
- Recognition in _____.
- 5 tickets to events for one year.

\$1,000 Sponsorship

- Recognition on the Charleston Kix website www.CharlestonKix.com

- Recognition in _____.
- 3 tickets to events for one year.

\$750 Sponsorship

- Recognition on the Charleston Kix website www.CharlestonKix.com
- Recognition in _____.
- 2 tickets to events for one year.