

## 2017 DK SPONSORSHIP REQUEST FORM

|  |  |
|--|--|
| Employee   |  |
| Event  |  |
| Date of Event  |  |
| Cost of Sponsorship/How will the payment be processed? |  |
| Details- How will DK be represented?                   |  |
| Manager Justification                                  |  |

## 2017 DK CHARITY MATCH FORM

|  |  |
|--|--|
| Employee   |  |
| Name of charity  |  |
| Date of donation                                       |  |
| Amount of employee donation<br>(please attach receipt) |  |
| Any additional details                                 |  |
| Manager Justification                                  |  |