

Tonka Bay Donation Program

Applicant Information

Donor Name **FRANKE + FIORELLA**

Address **401 NORTH 3rd STREET, SUITE 380**

City, State ZIP **MINNEAPOLIS, MN 55401**

Daytime Phone **612-338-1700**

Email **DEB@FRANKEFIORELLA.COM**

Donation Information

Donation Type **SERVICES FOR CITY OF TONKA BAY STRATEGY AND BRAND IDENTITY**

Desired Location (park name or street address and describe the location within the park)

NA

Donation Amount (please see program for current donation levels)

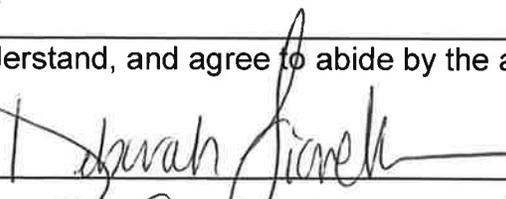
\$47,000 in-kind services donation - Please see attached proposal

Proposed Plaque Text (reviewed for appropriateness to policy and subject to approval)

NA

Sign & Send

I have read, fully understand, and agree to abide by the attached Donation Program Policy.
Signature of Donor

 **Deborah Franke, President/CFO**

Date

4.8.15

Please complete and return this form and your check for the total amount (payable to "City of Tonka Bay") to: City of Tonka Bay, 4901 Manitou Road, Tonka Bay, MN 55331. If you have any questions please contact us at 952.474.7994.