MOBILE COLLECTION SITE PROPOSAL

SANBS Information	
Zone	Northern Zone
Branch	Pretoria Central
Donor Relations Practitioner	Nyiko Mkhabela
Collection Site Code	
Collection Site Name	

Organisation Information	
Full Organisation Name	
Physical Address: Building / Office Park	Pioneer Office Park
Street Number	
Street Name	
Suburb	
City	
Postal Code	
GPS Coordinates	
Total Number of people at Business/School/Event	
Return Kilometers	

Blood Drive Information	
Blood Drive Category	Government - Department of education
Proposed Date	
Venue	
Blood Drive Forecast	Donors
Number of Beds	

Main Contact Details	
Title - Mr. Mrs. Ms. etc.	Mr.
First Name	John
Last Name	Doe
Date of Birth	2008-06-17 00:00:00
Gender	Male
Address	,
Postal Code	
Work Number	+27 78 692 5773
Cellphone	+27 78 692 5773
Email	john@gmail.com
Number of Posters	

Alternative Contact Details	
Title - Mr. Mrs. Ms. etc.	
First Name	
Last Name	
Date of Birth	
Gender	
Address Line 2	
Address Line 2	
Postal Code	
Work Contact Number	
Cellphone Number	
E - Mail Address	