



Kansas
Breastfeeding
Coalition, Inc.

Invoice
Exhibitor Fee – Kansas 2026 Breastfeeding Conference
Oct. 15-16, 2026

Date: _____
 Invoice #: 2026KBCCONF

Bill To:

Description	Amount	Quantity	Total Due
Platinum Sponsorship	\$2,000	_____	\$_____
Gold Sponsorship	\$1,500	_____	\$_____
Silver Sponsorship	\$1,000	_____	\$_____
Gala Sponsorship	\$500	_____	\$_____
Exhibitor only: Business	\$500	_____	\$_____
Exhibitor only: Non-profit or state agency	\$150	_____	\$_____
Meal for 2 nd staff person	\$50	_____	\$_____
TOTAL			\$_____

Name of entity applying for exhibit space (as entered on online application):

Please remit payment to:

Kansas Breastfeeding Coalition, Inc.
 3005 Cherry Hill
 Manhattan, KS 66503