

Thursday, May 9, 2019 | Cipriani 42nd Street | 6:00 PM

In Honor of the 2019 Servant of Justice Award Recipients: Michele A. Roberts and Jeffrey L. Kessler

Requested Listing*: _____
 Address: _____
 City: _____ State: _____ ZIP/Postal Code: _____
 Contact Name: _____ Company/Organization: _____
 Contact Phone: _____ Contact Email: _____

**Please provide the name of the individual(s) or organization as it should appear in all printed materials*

Please complete and return by May 1, 2019 to ensure listing in printed materials

<i>Dinner Chair</i>	<input type="checkbox"/> Leader: \$150,000 ▪ Listing as Leader in all event materials ▪ Two tables of ten in a premier location ▪ Logo prominently displayed on event and cocktail reception screens ▪ Recognition on stage, website, e-blast, and all printed materials	<input type="checkbox"/> Sponsor: \$100,000 ▪ Listing as Sponsor in all event materials ▪ Two tables of ten in a premium location ▪ Logo prominently displayed on event and cocktail reception screens ▪ Recognition on website, e-blast, and all printed materials
	<input type="checkbox"/> Partner: \$50,000 ▪ Listing as Partner in all event materials ▪ One table of ten in a prime location ▪ Logo prominently displayed on event and cocktail reception screens ▪ Recognition on website, e-blast, and all printed materials	<input type="checkbox"/> Counsel: \$25,000 ▪ Listing as Counsel in all event materials ▪ One table of ten in a preferred location ▪ Logo displayed on event and cocktail reception screens ▪ Recognition on website, e-blast, and all printed materials
<i>Dinner Committee and Tickets</i>	<input type="checkbox"/> Advocate: \$15,000 ▪ Listing as Advocate in all event materials ▪ One table of ten ▪ Logo displayed on event and cocktail reception screens ▪ Recognition on website, e-blast, and all printed materials	<input type="checkbox"/> Partner Ticket: \$2,500 ▪ Seating in a premium location and listing in the program <input type="checkbox"/> Counsel Ticket: \$1,500 ▪ Seating and listing in the program

I am unable to attend. Please find enclosed my contribution of \$_____

Payment Information

Please make check payable to **The Legal Aid Society** or submit credit card information:

Visa MasterCard American Express Discover

Card #: _____

Expiration: _____ Total: \$_____

Signature: _____

Please complete and return form with payment to:

The Legal Aid Society

Development Office

199 Water Street

New York, NY 10038

Email: skleinhandler@legal-aid.org

All donations are tax-deductible; the non-deductible portion of the dinner is \$245 per person.