

23rd Annual Lawton Chiles Gala
Sunday February 06, 2022
UF Hilton Hotel Ballroom
1714 SW 34th ST
Gainesville, FL 32607

Name: _____ Occupation: _____

Address: _____ City, State: _____ Zip: _____

Contact Phone: _____ Email: _____

Donations from our sponsors are critical to our success. Thank you for your contribution! **DUE January 17,2022**

SPONSORSHIP LEVELS: All sponsors are listed in the program *not all levels include tickets

- | | | |
|---|----------------------|-------------|
| <input type="checkbox"/> Friends of the Gala | \$125 contribution | |
| <input type="checkbox"/> Gala Associate | \$250 contribution | |
| <input type="checkbox"/> Bronze | \$500 contribution | 1 ticket |
| <input type="checkbox"/> Sapphire | \$1,000 contribution | 2 tickets |
| <input type="checkbox"/> Silver | \$1,500 contribution | 3 tickets |
| <input type="checkbox"/> Gold | \$2,500 contribution | 4 tickets |
| <input type="checkbox"/> Platinum | \$5,000 contribution | Table of 10 |

Listing Name for Program: _____

Enclosed is \$_____ to sponsor the 2022 Lawton Chiles Gala

If your sponsorship includes ticket(s), please list the guest name(s) below in the "Guest List" section

- FULL TABLE RESERVATION (10 Tickets, \$80 Each) \$800 *please list guest name(s) below in the "Guest List" section**

Table Name: _____

- #_____ **Non-Sponsor Ticket(s)** (\$85/Each) amounting to \$_____ *please list guest name(s) in the "Guest List" section

- #_____ **Student Ticket(s)** (\$45/Each) amounting to \$_____ *please list guest name(s) in the "Guest List" section

- Cannot attend the dinner, but enclosed is an **additional donation** in the amount of \$_____

GUEST LIST (Names for name tags):

- | | | |
|-----------|---|--|
| 1. _____ | <input type="checkbox"/> Payment Included | <input type="checkbox"/> Vegetarian Meal |
| 2. _____ | <input type="checkbox"/> Payment Included | <input type="checkbox"/> Vegetarian Meal |
| 3. _____ | <input type="checkbox"/> Payment Included | <input type="checkbox"/> Vegetarian Meal |
| 4. _____ | <input type="checkbox"/> Payment Included | <input type="checkbox"/> Vegetarian Meal |
| 5. _____ | <input type="checkbox"/> Payment Included | <input type="checkbox"/> Vegetarian Meal |
| 6. _____ | <input type="checkbox"/> Payment Included | <input type="checkbox"/> Vegetarian Meal |
| 7. _____ | <input type="checkbox"/> Payment Included | <input type="checkbox"/> Vegetarian Meal |
| 8. _____ | <input type="checkbox"/> Payment Included | <input type="checkbox"/> Vegetarian Meal |
| 9. _____ | <input type="checkbox"/> Payment Included | <input type="checkbox"/> Vegetarian Meal |
| 10. _____ | <input type="checkbox"/> Payment Included | <input type="checkbox"/> Vegetarian Meal |

I did not purchase a full table, but would like to be seated with my group that reserved a table under the name: _____

OTHER SPECIAL REQUESTS: _____

Payment Summary:

Sponsorship payment: \$_____

Non-sponsor ticket payment: \$_____

Student ticket payment: \$_____

Additional donation: \$_____

Total: \$_____

Payment Method:

Credit Card: Visit AlachuaDems.org

Check: Checks should be made payable to the ACDEC and mailed with this form to:

ACDEC

P.O. Box 5216

Gainesville, FL 32627

FOR ANY RESERVATION QUESTIONS Please contact Evelyn Foxx (352) 870-7013 or foxxe1948@gmail.com or the ACDEC office (352) 317-1730.

A contribution to the fundraiser is a contribution to the Alachua County Democratic Party, PO Box 5216, Gainesville, FL 32627. Your contribution may be used to connect with general elections and is subject to the prohibitions and limitations of the federal election campaign act. Political advertisement paid for by the Alachua County Democratic party, PO Box 5216, Gainesville, FL 32627.