## GALA COMMITMENT FORM

Full Name(s) or Organization's Name (as it should appear in print)			
Contact Name	St	treet Address	
City	State	Zip Code	
Phone	Email		
Yes! We would like to spo	onsor the event a	at the following level:	
Presenting Sponsor (\$1	.00,000)	Hope Hero (\$10,000)	
Transformation Partner (\$50,000)		Table Host (\$5,000)	
Champion of Change (\$25,000)		Individual Supporter (\$300 each) # of tickets:	
We would also like to spo	nsor the event t	chrough:	
Video Sponsor (\$7,500	); only two available	)	
Mission Muffins take-h	ome gift sponsor (\$	55,000; only one available)	
Print Sponsor (\$2,500;	only one available)		
Customized In-Kind S	ponsorship (contact	Megan Schmoll for more details)	
While we cannot spons contribution of \$	sor this year, we wou	ıld like to make a 100% tax-deductible	<u>.</u>
Comments:			
Method of Payment:			
■ Check	· —		
Gala Sponsorship	, <del></del>		
Central Union Mission PO Box 96763			
Washington, DC 20090-6763			

Please email completed form to Megan Schmoll at mschmoll@missiondc.org.