

*Evolving Pastimes*

2014 GALA DINNER, SILENT AUCTION &amp; AFTER PARTY

## REPLY CARD

Name \_\_\_\_\_

Title \_\_\_\_\_

Company/Organization \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Business / Day Phone \_\_\_\_\_

Fax \_\_\_\_\_

E-mail \_\_\_\_\_

I/We would like to reserve the following:

## Table Sponsor of 10 guests

\_\_\_\_ Signature Sponsor \$100,000 = \$ \_\_\_\_\_

\_\_\_\_ Presenting Sponsor \$ 50,000 = \$ \_\_\_\_\_

\_\_\_\_ Diamond Sponsor \$ 25,000 = \$ \_\_\_\_\_

\_\_\_\_ Emerald Sponsor \$ 15,000 = \$ \_\_\_\_\_

\_\_\_\_ Platinum Sponsor \$ 10,000 = \$ \_\_\_\_\_

\_\_\_\_ Gold Sponsor \$ 5,000 = \$ \_\_\_\_\_

\_\_\_\_ Silver Sponsor \$ 3,500 = \$ \_\_\_\_\_

\_\_\_\_ Bronze Sponsor \$ 2,500 = \$ \_\_\_\_\_

\_\_\_\_ Community Sponsor \$ 1,750 = \$ \_\_\_\_\_  
(For community non-profit organizations only)

## Individual Tickets

\_\_\_\_ Platinum Ticket \$ 1,000 = \$ \_\_\_\_\_

\_\_\_\_ Gold Ticket \$ 500 = \$ \_\_\_\_\_

\_\_\_\_ Silver Ticket \$ 350 = \$ \_\_\_\_\_

\_\_\_\_ Bronze Ticket \$ 250 = \$ \_\_\_\_\_

For tax purposes, the value of goods and services received for each Dinner guest is \$95. See reverse side for payment options and for space to list guest names.

## Bid for Education gift

I would like to make a gift to the 2014 Bid for Education program

☐ \$1,000 ☐ \$ 500 ☐ \$250 ☐ \$100 ☐ \$50 ☐ Other \$ \_\_\_\_\_

## 2014 Lexus Opportunity Drawing

I would like to purchase

☐ 30 tickets (\$500) ☐ 10 tickets (\$200) ☐ 5 tickets (\$100)☐ 1 ticket (\$25) ☐ Other \_\_\_\_\_

Ticket stubs will be sent to you upon receipt of funds.

Total Amount Enclosed \$ \_\_\_\_\_

## Payment Information

☐ Enclosed is my check in the amount of \$ \_\_\_\_\_ payable to:  
Japanese American National Museum☐ Please charge the amount of \$ \_\_\_\_\_ to my credit card☐ American Express ☐ MasterCard ☐ VISA ☐ Discover

Card Number \_\_\_\_\_

Expiration Date \_\_\_\_\_ CVV# \_\_\_\_\_

Cardholder Name \_\_\_\_\_

Signature \_\_\_\_\_

I understand that by signing this, the above stated amount will be charged to the listed credit card and accept full responsibility for the charges.

Please return this card in the enclosed envelope or fax a copy to 818.610.1177 by **March 31, 2014**. Reservations and seating arrangements will be made on a first-come, first served basis. For more information, contact Knock Out Productions at 888.552.1900, or visit [janm.org/dinner2014](http://janm.org/dinner2014).

## Table Sponsor—please complete below:

I would like our Table to be recognized as

\_\_\_\_\_

Please list primary contact person for this Table Sponsorship on line 1.

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

9. \_\_\_\_\_

10. \_\_\_\_\_