

In Reply Form
(over for payment information)

Name: _____ Phone: _____

Address: _____

City: _____ Zip: _____

E-Mail Address: _____

Company Name: _____

Sponsor Level:

_____ Presenting Partner (\$12,500) _____ Director Level (\$5,000) _____ Manager Level (\$3,500)

_____ Additional Sponsorship Opportunity _____ \$ _____

Guest Names <u>Please indicate Filet or Sea Bass for dinner. Also any food allergies or special needs.</u>	
1. _____	5. _____
2. _____	6. _____
3. _____	7. _____
4. _____	8. _____

Payment Information

For more information, contact the Italian Heritage Foundation Office at 585-471-8686

Or e-mail: info@italianheritagefoundation.org

Sponsorship Amount: _____ Total \$ _____

_____ Check (made payable to Rochester Italian Heritage Foundation)

_____ Credit Card (*Circle One*) Visa Mastercard American Express

_____ Debit Card

_____ VENMO to Yvonne Caternolo@IHF325

Card # _____ Security Code: _____ Expiration Date: _____

Cardholder Name and Contact #: _____

Cardholder's E-mail address: _____
(Receipt will be e-mailed to you once processed.)

Please return to:
Yvonne Caternolo
Italian Heritage Foundation of Rochester
100 Meridian Center; Suite 325
Rochester, NY 14618