

SPONSOR REPLY FORM: Please respond by **Monday, September 18** to be listed on event materials
NAME (as you would like it to appear) _____

Event Sponsors: please reserve the following

- Founder's Circle @ \$25,000** \$ _____
Top logo placement on event materials, admission for 10
- National Sponsor @ \$15,000** \$ _____
Prominent logo placement on event materials, admission for 10
- Champion Sponsor @ \$10,000** \$ _____
Prominent logo placement on event materials, admission for 10
- Fighter for Families @ \$5,000** \$ _____
Admission for five, logo and name listing on all event materials
- Advocate for Roe @ \$2,500** \$ _____
Admission for five, logo and name listing on all event materials
- Freedom Ticket Sponsor @ \$1,000** \$ _____
Admission for two, name listing on all event materials

Event Tickets: please reserve the following (includes admission for one)

- Professional Ticket @ \$500** \$ _____
- General Ticket @ \$300** \$ _____
- Activist Ticket @ \$100 OR a volunteer shift*** \$ _____

Donations:

- I am unable to join you this year, but would like to support
 Reproductive Freedom for All's work in the amount of: \$ _____

DESIGNATION REQUIRED: If no designation is made, your gift will automatically be allocated to Reproductive Freedom for All, 501(c)(4). To split your gift between the two organizations, please indicate the percentages, below:

_____ **Reproductive Freedom for All is a 501(c)(4) organization for electoral & lobbying activities.** Contributions, while not tax-deductible, are the best way to make political change. No funds will be earmarked or reserved for any political purpose. The first \$10 of your annual gift keeps your membership status active for an additional year.

_____ **Reproductive Freedom for All Foundation is a 501(c)(3) organization for non-political, educational activities.** Contributions are tax-deductible, with the exception of the value of any benefits provided.

Check enclosed: Make payable to either Reproductive Freedom for All (c4) OR Reproductive Freedom for All Foundation (c3)

Pay Online: www.ReproductiveFreedomForAll.org/DC23

Please CHARGE my account: ___VISA ___MasterCard ___ American Express ___Discover/NOVUS

Name (as it appears on card) _____

Card Number _____ Expiration _____

Billing Address _____

Primary Phone: _____ Email: _____

Signature: _____

Questions? Please contact events@reproductivefreedomforall.org

To mail in a check: 1725 Eye St NW, Ste. 900, Washington, DC 20006 | *Please note that USPS has been experiencing delays*

c3 Tax ID: 52-1100361 // c4 Tax ID: 13-2630359

*email events@reproductivefreedomforall.org for any questions and to volunteer for an Activist Ticket