

I/WE WOULD I	LIKE TO PURCH	IASE TA	BLE(S) OF TEN:			
□ \$5,000 UN E	DERWRITER	\$	(OR	MORE)		
□ \$1,500 BEN □ \$1,000 PATE	EFACTOR RON	□ \$500 ± \$250 ±	SPONSOR SUPPORTER	□ \$150 FRIEND		
				EDUCTIBLE CONTRIBUTION		
Name		(Please print	as you wish to be listed))		
Address						
CITY / STATE / ZIP						
Phone			Fax			
E-mail						
IF YOU'VE ALR YOUR GENERO		CONTRIBUTION	OR PURCHASEI	D TICKETS, THANK YOU FOR		
ENCLOSED PL	EASE FIND MY	TICKET(S) AT THE FOLLOWING LEVEL: TOR \$500 SPONSOR \$150 FRIEND \$250 SUPPORTER ND BUT WOULD LIKE TO MAKE A TAX DEDUCTIBLE CONTRIBUTION LLY KIVELL \$				
PLEASE CHARG	GE MY CREDIT	CARD FOR \$				
	☐ AMEX	□ VISA	MASTERCAF	RD DISCOVER		
ACCOUNT NUMBER	NUMBER EXP. DATE					
NAME ON CARD		SECURITY CODE				

PLEASE RESPOND PRIOR TO FRIDAY, NOVEMBER 18 IF YOU WISH TO BE LISTED IN THE EVENT PROGRAM.

PLEASE MAKE CHECKS PAYABLE TO: **THE BREAST CANCER RESEARCH FOUNDATION.**PLEASE MAIL THE COMPLETED FORM OR FAX TO 646-497-0890.

For additional information, please call 646-497-2650 or email cnoland@bcrfcure.org. The Breast cancer research foundation is a 501(c)(3) organization. Your contribution is tax deductible, less \$50 per ticket for those who attend.