

16TH ANNIVERSARY
ADVANCEMENT PROJECT
EQUITY
21ST CENTURY CIVIL RIGHTS

Sunday • April 26 • 2015
Los Angeles River Center
570 West Avenue 26, Los Angeles, CA 90065

3:00 PM Check-in & Reception
4:30 PM Presentation & Awards
5:30 PM Dessert & Coffee

Honorees: **SUPERVISOR MARK RIDLEY-THOMAS • GERALD CHALEFF • INNERCITY STRUGGLE | COMMUNITY COALITION | UTLA**

DEADLINES

March 10th for Sponsorship Listing in Invitation • April 8th for Program Journal

SPONSORSHIPS

Leader for Justice: \$25,000 or more

Unlimited tickets, Inside Cover in program, name listing on invitation and website

Sweet 16 Supporter: \$16,000—\$24,999

Sixteen tickets, Gold Page in program, name listing on invitation and website

Peacemaker: \$2,500—\$4,999

Four tickets, Half Page in program, name listing on invitation and website

Civil Rights Champion: \$10,000—\$15,999

Ten tickets, Silver Page in program, name listing on invitation and website

Community Advocate: \$1,000—\$2,499

Two tickets, Quarter Page in program, name listing on invitation and website

Change Agent: \$5,000—\$9,999

Six tickets, Full Page in program, name listing on invitation and website

Equalizer: \$500—\$999

Two tickets, name listing on program, invitation, and website

TICKETS & GIFTS

Tickets: We/I would like ____ ticket(s) at \$150 each for a total of \$_____

Gift: We are/I am unable to attend but would like to contribute \$_____

PROGRAM JOURNAL

I would like to purchase an ad: Full Page: \$1,000 Half Page: \$500 Quarter Page: \$250
Please submit a 4.5"W x 7.5"H Full Page, 4.5"W x 3.6"H Half Page, or 2.25"W x 3.6" Quarter Page color PDF to: alopez@advanceproj.org
Let us know if you need assistance creating your copy

CONTACT & PAYMENT INFORMATION

First Name _____ Last Name _____

Organization _____

Street Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Fax _____ This gift is: Personal Organizational

YOUR PREFERRED NAME OR ORGANIZATION WILL BE PRINTED AS LISTED ABOVE FOR ALL SPONSORS

Total amount enclosed: \$_____ (Check payable to "Advancement Project")

Visa Mastercard American Express

Name on Card _____ Card Number: _____

Signature _____ Exp ____/____ Security Code _____

PLEASE E-MAIL/FAX FORM & PAYMENT TO: Adilene López Valenzuela at alopez@advanceproj.org, (213) 989-1309
OR MAIL TO: Advancement Project • 1910 West Sunset Blvd. Suite 500 • Los Angeles, CA 90026

More information & online payment options at www.advancementprojectca.org/21stCenturyCivilRights

Questions? Contact Alison Morgan at amorgan@advanceproj.org or (213) 406-9147
Advancement Project Tax ID: 95-4835230