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**2023 National Philanthropy Day**

**November 15, The Pfister Hotel**

***Sponsor Commitment Form***

**I wish to be a National Philanthropy Day® sponsor at the \_\_\_\_\_\_\_\_\_\_\_\_\_\_ level.**

**⃝ My check for $ \_\_\_\_\_\_\_\_\_\_ is enclosed.**

**⃝ Please bill me at the address below.**

**⃝ I am unable to attend, but enclosed is my tax‐deductible donation of $ \_\_\_\_\_\_\_\_\_\_\_\_\_\_.**

**Company Name** (as it will be printed in marketing materials) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Contact:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Title:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Address:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**City, State, Zip:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Phone/Fax:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**E‐Mail:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Please return to:**

Julie Cordero, Chapter Administrator

AFP SEWI

P.O. Box 511400

Milwaukee, WI 53203‐1400

**Questions?**

(414) 399‐0281

chapteradmin@afpsewi.org

**Please reply by September 6 to appear on the event invitation.**