

# “An Evening with Ken Burns” October 28, 2008

## Premier Sponsorship Form (\$15,000)

Corporation Name: \_\_\_\_\_  
*(As you would like it to appear in publicity material)*

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

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Contact Name: \_\_\_\_\_

Contact Phone: (\_\_\_\_\_) \_\_\_\_\_ - \_\_\_\_\_ Contact Email: \_\_\_\_\_

### Payment:

Check made payable to **Allegheny General Hospital** is enclosed.

Bill my credit card:     Visa     MasterCard     Discover     AmEx

Account Number: \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Name on Card: \_\_\_\_\_

Expiration Date: \_\_\_\_/\_\_\_\_

Signature: \_\_\_\_\_

### Guest List – Private Reception (20 guests allowed):

- |           |           |
|-----------|-----------|
| 1. _____  | 11. _____ |
| 2. _____  | 12. _____ |
| 3. _____  | 13. _____ |
| 4. _____  | 14. _____ |
| 5. _____  | 15. _____ |
| 6. _____  | 16. _____ |
| 7. _____  | 17. _____ |
| 8. _____  | 18. _____ |
| 9. _____  | 19. _____ |
| 10. _____ | 20. _____ |

*Please return this form to:*  
**Allegheny General Hospital**  
**Office of Fund Development**  
**320 East North Ave.**  
**Pittsburgh, PA 15212**  
*or*  
**FAX it to: 412-359-6299**