

**12th ANNUAL LAWTON CHILES GALA**  
**Sunday, October 3, 2010**  
**UF Hilton Hotel and Conference Center**

PLEASE PRINT. COMPLETE AND SUBMIT THIS FORM WITH YOUR CHECK(S) ASAP  
Pick up your table assignment at the Registration Desk the night of the dinner.  
Providing your email address enables us to send you further details as they develop.  
Ample free parking at Conference Center

Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

(required for all contributions)

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

Contact Phone: \_\_\_\_\_

Email: \_\_\_\_\_

**SPONSOR TICKETS** (Sponsor donations are critical to our success.)

Enclosed is \_\_\_\_\_ to sponsor the 2010 Lawton Chiles Gala  
(amount-minimum \$225)

(Sponsors will receive one dinner ticket for each \$225 contribution plus program listing)

Please do not list this Sponsorship in the dinner program

Please list this Sponsorship in the program as follows: \_\_\_\_\_

**NON-SPONSOR TICKETS**

Enclosed is \_\_\_\_\_ for \_\_\_\_\_ ticket(s) at \$75.00 each/\$45.00 students  
(amount) (number)

Special Request: Veggie Meals \_\_\_\_\_ Other \_\_\_\_\_

Tickets purchased above will be used by (names needed for Name Tags):  
\_\_\_\_\_

Cannot attend the dinner, but enclose \_\_\_\_\_ as contribution to the 2010 Lawton Chiles Gala.

**FULL TABLE RESERVATIONS** (Tables for 10 this year - No extra charge to reserve a full table)

Please reserve a table for 10 for: Ticket Payments:

- |          |                                   |
|----------|-----------------------------------|
| 1 _____  | <input type="checkbox"/> included |
| 2 _____  | <input type="checkbox"/> included |
| 3 _____  | <input type="checkbox"/> included |
| 4 _____  | <input type="checkbox"/> included |
| 5 _____  | <input type="checkbox"/> included |
| 6 _____  | <input type="checkbox"/> included |
| 7 _____  | <input type="checkbox"/> included |
| 8 _____  | <input type="checkbox"/> included |
| 9 _____  | <input type="checkbox"/> included |
| 10 _____ | <input type="checkbox"/> included |

**Payment Summary:**

Sponsor Tickets \_\_\_\_\_  
Non-Sponsor Tickets \_\_\_\_\_  
Extra Donation \_\_\_\_\_  
Total \_\_\_\_\_

The placard our full table should read:  
\_\_\_\_\_

CHECKS SHOULD BE MADE OUT TO **ACDEC** AND MAILED WITH THIS FORM TO:

**ACDEC**  
PO Box 223  
Gainesville, FL 32602

FOR RESERVATION QUESTIONS

PLEASE CONTACT Pat or Ron Bern 352-335-6863 or ronb1301@hotmail.com

or the ACDEC office 352-373-1730

A contribution to the fundraiser is a contribution to the Alachua County Democratic Party, PO Box 223, Gainesville FL 32602.

Your contribution may be used in connection with Federal elections and is subject to the prohibitions and limitations of the Federal Election Campaign Act.

Political advertisement paid for by the Alachua County Democratic Party, PO Box 223, Gainesville FL 32602.