



SAN DIEGO LAW LIBRARY FOUNDATION

WITKIN AWARD DINNER

Thursday, October 9, 2014
Dinner Reservations

Individual Dinner Ticket
_____ @ \$125 each **Total \$** _____

Reserved Table for SIX
_____ @ \$1,000 **Total \$** _____

ADVERTISING OPPORTUNITIES

Advertisements are available in Congratulatory Color and Black & White.

FULL-PAGE (5" x 8")

Color @ \$1,000
 B&W @ \$500

HALF-PAGE (5" x 4")

Color @ \$500
 B&W @ \$250

QUARTER-PAGE (2.5" x 8")

Color @ \$200
 B&W @ \$125

Please provide logos and ad art files in EPS, PDF or TIFF to kcatherwood@foley.com. Include a contact person, phone/fax number and email. To insure inclusion in the program, **submissions must be received no later 3pm Friday, October 3, 2014.**

SPONSORSHIP AND TICKET OPPORTUNITIES

TITLE SPONSOR \$10,000

Ten Dinner Tickets
Full-page color ad in Program
Name on Law Library Donor Wall

PRESENTING SPONSOR \$5,000

Five Dinner Tickets
Half-page color ad in Program
Name on Law Library Donor Plaque

EVENT SPONSOR \$2,500

Four Dinner Tickets
Quarter-page color ad in Program
Name on Law Library Donor Plaque

SUPPORTING SPONSOR \$1,500

Two Dinner Tickets
Quarter-page B&W ad in Program
Name on Law Library Donor
Plaque

FRIENDS OF THE LAW LIBRARY \$1,000

Name and logo in Program
Name on Law Library Donor Plaque

Additional Sponsorship Opportunities

Centerpieces \$200
 Photographer \$250
 Wine \$250
 Beer \$250
 Awards \$500

Please contact Kay Catherwood at 858-847-6723 or kcatherwood@foley.com for questions regarding sponsorship package benefits.

PAYMENT INFORMATION

- Check Enclosed. Please make checks payable to **Law Library Justice Foundation** (Tax I.D. No. 95-6048420)
11 05 Front St, San Diego, CA 92101, Attn: Marcia O'Hara
- Credit Card Payment: Visa Mastercard American Express Discover
Credit Card payments may be faxed to (619) 239-1563, Attn: Marcia O'Hara
You may also make your reservations, payments and donations online at www.sandiegolawlibrary.org/witkin-dinner

Name: (please print) _____
Company Name: _____
Card Number: _____ Expiration Date ____/____/_____
Card Billing Address: _____
Signature: _____