

The New York State Conservative Party

2022 Fall Reception — October 18, 2022

Celebrating Our
60th Anniversary



SPONSORS

_____ **\$10,000 Co-Chair** \$ _____

(10 tickets and a Gold Ad in our Journal)

_____ **\$5,000 Associate** \$ _____

(5 tickets and a Silver Ad in our Journal)

_____ **\$1,500 Captain** \$ _____

(2 tickets and a Full Page Ad in our Journal)

TICKETS

_____ **\$500 Reception** \$ _____

(per individual ticket)

CONTRIBUTION

Sorry, I am unable to attend but please accept my donation to help the NYS Conservative Party \$ _____

JOURNAL ADVERTISEMENT (DIGITAL)

This year we are doing a digital journal. To place an ad or greeting in the journal, transmit your ad via e-mail to nyscp@aol.com — **please put "Reception Journal" in the e-mail's subject line — by October 11, 2022.** If preferred, mail your ad to: New York State Conservative Party, 486 78th Street, Brooklyn, NY 11209. Be sure to provide your email and phone number in case we need to contact you.

\$2,000 GOLD \$ _____

\$1000 SILVER \$ _____

\$500 FULL PAGE \$ _____

\$300 HALF PAGE \$ _____

\$150 QUARTER PAGE \$ _____

\$100 PATRON LISTING \$ _____

INDIVIDUAL OR COMPANY NAME & INFO

Print as you wish to appear in the Journal:

Contact Person: _____

Mailing Address: _____

Phone Number: _____

Email Address: _____

(please provide your email address if taking out a Journal Ad so we can email the digital journal to you)

RECEPTION RESERVATIONS

Please print individual names of guests for each ticket.

Name of Guest/Attendee

1. _____

2. _____

3. _____

4. _____

5. _____

6. _____

7. _____

8. _____

9. _____

10. _____

Please make all checks payable to the New York State Conservative Party. If you wish to pay by credit card you can visit CPNYS.org/fall or you can complete the following information and mail it to **NYS Conservative Party, 486 78th Street, Brooklyn, NY 11209**

Type of Credit Card: _____

Cardholder's Name: _____

Address of Cardholder: _____

Card Number: _____

Exp. Date: _____ Sec/Code: _____

Signature of Cardholder: _____

**TOTAL AMOUNT FOR
RECEPTION/JOURNAL/
CONTRIBUTION: \$ _____**

Return by Mail or RSVP Online at CPNYS.org/fall