

Building Blocks for the Future



Bringing academic enrichment programs to elementary school students



Special Guest:
Los Angeles Mayor
Eric Garcetti

Join the Mayor for this special educational fundraiser benefiting The Vanir Foundation a 501 (c)(3).

Event Date: Thursday, March 27, 2014

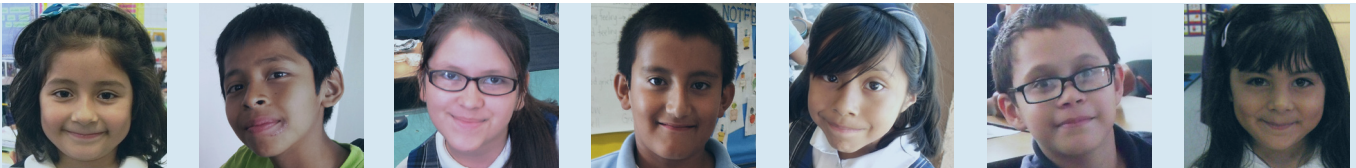
Event Time: 5:30 p.m. – 8:00 p.m.

Event Location: City Club Los Angeles
555 S. Flower Street, 51st Floor
Los Angeles, CA 90071



For more information please visit or call:

The Vanir Foundation in Memory of H. Frank Dominguez
www.VanirFoundation.org or (916) 419-2415



Reservation and Sponsorship Opportunities

- Please reserve _____ tickets at \$1,000.00 each
- I cannot attend but would like to make a donation to the Vanir Foundation in the amount of \$ _____

I would like to sponsor this event in one of the following levels:

- \$5,000** **Straight A's** Includes 4 event tickets and verbal acknowledgement at the event
- \$10,000** **Honor Roll** Includes 6 event tickets; name on media materials; and verbal acknowledgement at the event
- \$15,000** **Head of the Class** Includes 8 event tickets; logo on the Vanir Foundation website; name on media materials; and verbal acknowledgement at the event
- \$25,000** **Changing Lives** Includes 10 event tickets; VIP reception with special guests; logo on the Vanir Foundation website; name on media materials; and verbal acknowledgement at the event

(Please see reverse side for payment information)

Please mail, fax or e-mail your RSVP to:



The Vanir Foundation in Memory of H. Frank Dominguez

4540 Duckhorn Drive, Suite 100, Sacramento, CA 95834 | Fax: (916) 419-2407 | info@vanirfoundation.org
For online donations, please visit: www.VanirFoundation.org

The Vanir Foundation in Memory of H. Frank Dominguez is a 501 (c)(3) charitable foundation. Tax I.D. #20-0774784

(Please cut along the dotted line and keep the above portion for your information)

Payment Information

Please make checks payable to: *The Vanir Foundation in Memory of H. Frank Dominguez*

Enclosed: please find Check No. _____ Check Amount \$ _____

Please charge my credit card: Visa MasterCard American Express

Cardholder Name _____ Amount \$ _____
(as it appears on card)

Card Number _____ Exp. Date ____/____ CVCC code _____

Signature: _____

Billing Address _____ City: _____

State: _____ Zip: _____ Phone: _____ Email: _____

Attendees: _____
