The Host Committee and Finance Committee

Cordially invite you to attend a reception Honoring

Melinda Katz
The Next Comptroller of New York City

Thursday, June 19, 2008
6:00 – 7:30 p.m.
555 Madison Avenue - 12th Floor
New York City

Donor $1000
Sponsor $4950
Business Attire

Please RSVP Mayra Diaz
(212) 201-0599 or via email RSVP@melindakatz.org or enclosed card
Please RSVP by June 12, 2008. You can fax response to 212-201-0594

_____ Yes, I/we will attend the Reception on Thursday, June 19, 2008; I/we would like to contribute:
   _____ $1000 (Donor)
   _____ $4950 (Sponsor)
   _____ $________ (Other Amount)

_____ No, I/we are unable to attend the Reception. Please find my/our generous contribution of $________.

Individuals may contribute up to $4,950.00 per election cycle. These limits are for the primary and general elections combined. Both monetary and “in-kind” contributions of goods and services are subject to these limits. All candidates are prohibited from accepting contributions from corporations, LLC’s, LLP’s, including, but not limited to, professional corporations (P.C.)

I understand that State law requires that a contribution be in my name and be from my own funds. I hereby affirm that this contribution is being made from my personal funds, is not being reimbursed in any manner, and is not being made as a loan; in addition, in the case of a credit card contribution, I also hereby affirm that this contribution is being made from my personal credit card account, billed to and paid by me for my personal use, and has no corporate or business affiliation.

CORPORATE, LLC, AND LLP CONTRIBUTIONS ARE NOT ALLOWED

Signature: ________________________________
Date: ________________________________

Contributions are not deductible as charitable contributions for federal income tax purposes.

Please help us comply with city finance laws by providing the following information:

Name: _____________________________________________

Home Address (Required by law):
City: ___________________ State: ___________________ Zip Code: ___________________

Home Phone: ___________________ Cell Phone: ___________________

Occupation: ___________________

Employer: ___________________

Employer Address:
City: ___________________ State: ___________________ Zip Code: ___________________

Work Phone: ___________________ E-Mail Address: ___________________

To make your contribution payment by credit card, please complete the following information and mail to: P.O. Box 831, Forest Hills, NY 11375: CANNOT BE A COMPANY CARD

☐ Visa ☐ MasterCard ☐ American Express ☐ Discover

Name as it appears on card: _____________________________________________

Card Number: _____-_____-_____-_____ Exp. _____________

Amount: $__________________  Signature: ___________________________

Paid by Katz for New York, Treasurer Ron Kaye