



### Honoring

**Jeremy Beal** *Head of Investment Solutions at Morgan Stanley Wealth Management*

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#### In support of Partnership with Children, please reserve the following:

\_\_\_ **HERO TABLE | \$75,000** Premier table of ten; mention in press release; prominent HERO recognition in all event materials; logo on printed program; acknowledgement in remarks by CEO Wesner Pierre; and logo/name on the event website for six months.

\_\_\_ **VISIONARY TABLE | \$50,000** Premier table of ten; prominent recognition in all event materials; prominent Visionary listing in the printed program; acknowledgement in remarks by CEO Wesner Pierre; and logo/name on the event website for six months.

\_\_\_ **CHAMPION TABLE | \$25,000** Central table of ten; recognition in event materials; Champion listing in the printed program; and listing on event website for six months.

\_\_\_ **MENTOR TABLE | \$15,000** Prime table of ten and Mentor listing in the printed program.

\_\_\_ **ADVOCATE TICKET | \$2,500** Premier seat for one; Advocate listing in the program

\_\_\_ **FRIEND TICKET | \$1,000** Individual ticket for one and Friend listing in the program

\_\_\_ **FLORAL SPONSOR | \$10,000** Logo on table sign on each table; listing in program

\_\_\_ **COCKTAIL SPONSOR | \$10,000** Logo on napkins; signage at bars; listing in program

\_\_\_ I/We cannot attend but would like to contribute \$\_\_\_\_\_ to support Partnership with Children. *Donors of \$2,500 or more receive an Advocate listing in the program.*

**Note: Gala commitments received by May 15<sup>th</sup> will be recognized in the printed program.**

Name \_\_\_\_\_

(Name and/or company as you wish it to appear in the printed program)

Billing Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ Email \_\_\_\_\_

**METHOD OF PAYMENT:**

\_\_\_\_\_ Check (Please make check payable to Partnership with Children)

Please charge \$ \_\_\_\_\_ to my credit card:

\_\_\_\_\_ American Express \_\_\_\_\_ MasterCard \_\_\_\_\_ Visa \_\_\_\_\_ Discover

Name (as it appears on the card) \_\_\_\_\_

Card Number \_\_\_\_\_ Expiration Date \_\_\_\_/\_\_\_\_ CVC \_\_\_\_\_

**Mail to:** Partnership with Children, One Battery Park Plaza, Suite 200, New York, NY 10004  
or Fax to: 212-689-9568.

For tax purposes, all but \$350 of each ticket and \$3,500 of each table purchased is tax-deductible. Partnership with Children is a 501(c)(3) charity with a four-star Charity Navigator rating (Tax ID #13-5596751). For further information, please contact [czeldin@partnershipwithchildren.org](mailto:czeldin@partnershipwithchildren.org).

**Thank you for your commitment to ensuring that NYC children can strengthen their emotional, social, and cognitive skills to succeed at school, society, and life!**