



SICM HARVEST FOR THE PANTRY

Sunday, November 5, 2017

RESPONSE FORM



YES, I/WE WANT TO HELP PROVIDE A HARVEST FOR THE PANTRY

NAME _____

ADDRESS _____ ZIP _____

PHONE _____ EMAILADDRESS _____

____ I/WE WOULD LIKE TO BE PART OF THE HONORARY COMMITTEE. LIST MY/OUR NAME OR NAMES AS ABOVE OR

____ Executive Chef: \$1000 Level, includes 8 tickets to event (1 table)

____ Sous Chef: \$550 Level, includes 6 tickets to event

____ Pastry Chef: \$325 Level, includes 4 tickets to event

____ Maitre de: \$175 Level, includes 2 tickets to event

____ Server: \$100 Level, includes 1 ticket to event

____ I/WE WOULD LIKE TO MAKE A CONTRIBUTION TO THE SILENT AUCTION/PICK-A-PRIZE:

ITEM(S): _____ (*NEW items only, please*)

VALUE _____ (value of donation is tax deductible)

____ I/WE WILL ATTEND AND ENCLOSE \$ _____ for _____ tickets (\$30 each)
(\$25 of each ticket is tax deductible)

____ I/WE ARE UNABLE TO ATTEND, BUT WOULD LIKE TO PURCHASE _____ TICKETS TO ALLOW FOOD PANTRY GUESTS OR OTHERS TO ATTEND, OR WOULD LIKE TO MAKE A CONTRIBUTION:

\$ _____ ENCLOSED

____ ELIGIBLE FOR GE MATCH _____ or OTHER: _____

PLEASE RETURN TO:
Harvest for the Pantry
c/o SICM
1055 Wendell Avenue
Schenectady, NY 12308

Phone: 374-2683
Fax: 382-1871
(Please return ASAP;
Honorary Committee deadline: 10/20)