

MICHIGAN BLACK CAUCUS

MBC

Sponsorship

LOCAL ELECTED OFFICIALS

PO Box 7409 Ann Arbor, MI 48107
 Phone 734-662-3246 Fax 734-669-6939
 email: mreed@mml.org

DATE:

SPONSOR INFORMATION

Name: _____

Company Name: _____

Street Address: _____

City, ST, ZIP: _____

Phone: _____

PAYMENT METHOD

You will be billed for the payment amount listed below

SPONSORED EVENT	DESCRIPTION OF SPONSORSHIP	AMOUNT OF SPONSORSHIP		AMOUNT NOT TO EXCEED
		\$	or	\$
		\$	or	\$
		\$	or	\$
		\$	or	\$
		\$	or	\$
		\$	or	\$
		\$	or	\$
		\$	or	\$
		\$	or	\$
		\$	or	\$
TOTAL SPONSORSHIP AMOUNT		\$		

Authorized by: _____
 (Name & Title)

Thank You for Your Support!