2013 A NIGHT IN THE PARK GALA
Commitment Form

I /We would like to support the upcoming **2013 A Night in the Park Gala** at the following level:

Name: _____

Title: _____ Company: _____

Address: _____ City/State/Zip: _____

Telephone: _____ Facsimile: _____ E-mail: _____

I/We would like to purchase the following:
Table (10 guests)

❑ Tribute Level	(Three Tables)	$25,000
❑ Champion Level	(Two Tables)	$10,000
❑ Faith Level	(One Table)	$5,000
❑ Patron Level	(Four Seats)	$2,500
❑ Patron Ticket	(One Seat)	$200
❑ Appeal Gift		$_____
❑ Non-Attending Gift		$_____

** Fair Market Value: $85 per seat.*

Method of Payment:

❑ Please invoice me at the address above.
❑ Please charge my credit card. (Include information below.) Check one: ❑ Visa ❑ MasterCard
Card Number: _____ Exp. Date: _____

Name as it Appears on Card: _____

❑ STOCK or WIRE TRANSFER to the National Multiple Sclerosis Society:

Stock transfer transactions are managed by:
Piper Jaffray
111 SW Fifth Ave., Ste. 1900
Portland, OR 97204
(503)275.6925 or (800)874.0946
DTC Account #311
Account #401-01892-TEC

Wire transfer transactions are managed by:
Wells Fargo Bank
420 Montgomery St.
San Francisco, CA 94104
Local agent: Jeff Ahrend (503) 886.1449
Wire Routing Transit # 121000248
BNF/Field 4200 - Beneficiary Account #010-5006831
International Transfer: SWIFT BIC WFBIUS6S
CHIPS Participant: UID ABA 0407, SWIFT BIC WFBIUS33

Payment will be made on (date). Payment must be made before 9/12/13:_____

List me/company in all recognition materials follows:_____

PLEASE REMIT TO:

Lisa Roth ▪ National MS Society, Oregon Chapter ▪ 5331 SW Macadam Ave Ste. 290 ▪ Portland, OR 97239
lisa.roth@nmss.org ▪ Fax: 503.223.2912 ▪ Ph: 503.445.8340 ▪ defeatMS.com
Tax ID: 93-0551147