



The Genesis Alliance 14<sup>th</sup> Annual Luncheon  
2017 Luncheon Beneficiary: Black Mountain Home for Children,  
Youth and Families's Apprenticeship Program

Friday October 6, 2017

Silent Auction begins at 11:00 a.m. – Luncheon at 12:00 pm

Sidney Powell  
Founder

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The Genesis Alliance,  
Inc.  
P.O. Box 15210  
Asheville, NC 28813  
(828) 274-4064  
[www.genesisalliance.org](http://www.genesisalliance.org)

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*Please check your level of participation:*

**Presenting Sponsor \$10,000** - Receive seat at head table and 2 tables for 8 at Luncheon. Recognition and speaking opportunity at beginning of program, if desired. Space for marketing display at luncheon. Name recognition in sponsor contracts, program, website, social media, event signage, and media releases.

**Platinum Sponsor \$5,000** - Includes 2 tables for 8 at Luncheon. Space for marketing display at luncheon. Name recognition in program, website, event signage, and media releases.

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**Silver Sponsor \$1,000** - Includes 1 table for 8 at Luncheon. Name recognition in program, website, event signage, and media releases.

**Table Host \$500** - 1 table for 8 at Luncheon. Name recognition in program, event signage.

**Individual Ticket \$75**

Only the contribution in excess of the ticket value of the luncheon, at this time estimated at \$25.00 per person, is deductible as a charitable contribution unless all benefits are declined. Names of all guests attending sponsored tables must be provided by Thursday, September 28th, to Hellen Goldfarb at [hellen@federalappeals.com](mailto:hellen@federalappeals.com); otherwise, unassigned seats will be considered forfeited and made available for individual ticket holders.

*Payment Information:*

Enclosed is my check for \$\_\_\_\_\_ payable to The Genesis Alliance, Inc.

Please bill my MasterCard  Visa  American Express

Acct# \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Billing zip code: \_\_\_\_\_ CCV: \_\_\_\_\_

I (we) request that this gift remain anonymous.

I am unable to attend but enclose a contribution of \$\_\_\_\_\_

Underwriter's Signature

Date

Please keep a copy of this form and return the original along with your payment to:  
The Genesis Alliance, P.O. Box 15210, Asheville, NC 28813

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