

NUMBER OF TICKETS \_\_\_\_\_ \$150 PER PERSON

\_\_\_\_\_ \$1500 TABLE OF 10

AMOUNT ENCLOSED \_\_\_\_\_

I AM UNABLE TO ATTEND, HOWEVER I WISH TO SUPPORT THE  
**WESTCHESTER HISPANIC LAW ENFORCEMENT ASSOCIATION.**  
ENCLOSED IS A DONATION IN THE AMOUNT OF \$ \_\_\_\_\_

SEATING IS LIMITED  
R.S.V.P. OCTOBER 22<sup>ND</sup> 2019

NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_ STATE \_\_\_\_\_ ZIP \_\_\_\_\_

**PLEASE MAKE CHECK PAYABLE TO:**  
**WESTCHESTER HISPANIC LAW ENFORCEMENT ASSOCIATION**