UNITED VETERANS BEACON HOUSE CONTACT INFORMATION 25TH ANNIVERSARY GALA NAME ____ **RED CARPET SALUTE** AFFILIATION _____ WEDNESDAY, OCTOBER 16, 2019 THE HERITAGE CLUB ADDRESS _____ CITY STATE ZIP TYES! I WANT TO HONOR A VETERAN AT THE 25TH ANNIVERSARY GALA - \$3.500 PHONE _____ NAMES AS THEY SHOULD APPEAR IN PROGRAM: EMAIL _____ VETERAN _____ CREDIT CARD PAYMENT SPONSOR _____ ☐ MASTER CARD ☐ VISA ☐ AMERICAN EXPRESS I AM UNABLE TO ATTEND, PLEASE CARD# EXP. DATE CVV# ACCEPT MY CONTRIBUTION. \$ NAME ON CARD TOTAL ENCLOSED: \$ BILLING ADDRESS _____ DEADLINE FOR INCLUSION IN CITY STATE ____ ZIP ____ PRINT MATERIALS: SEPTEMBER 1, 2019 SIGNATURE _____ INFO: TINA@UVBH.COM | 631-665-1571

PLEASE MAKE CHECKS PAYABLE TO UNITED VETERANS BEACON HOUSE AND MAIL WITH THIS CARD TO:
UNITED VETERANS BEACON HOUSE, P.O. BOX 621, BAY SHORE, NY 11706.
A NON-PROFIT TAX EXEMPT 501(C)3 ORGANIZATION. ALL CONTRIBUTIONS ARE FULLY TAX DEDUCTIBLE AS ALLOWED BY LAW.