

All proceeds go directly towards programs that empower individuals in recovery.

## BILLING INFORMATION

Organization, Corporation, or Family Name \_\_\_\_\_

Contact Person \_\_\_\_\_

Contact Phone \_\_\_\_\_

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**Sponsorship:** Empowerment  Recovery  Education  Hope

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**Ad Journal:** Full-Page  Half-Page  Quarter Page

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Checks can be mailed with this form directly to:

The Ammon Foundation  
1622 South Wood Avenue  
Linden, New Jersey 07036

You may also register online at:  
**AmmonFoundation.org/Gala**

For more information:  
info@ammonfoundation.org  
908-525-3735