Sponsorship level:

| \$250,000—Luminary | | | \$20,000—Reformer | | | |
|---|-----------------------------|-------------------------------|--|--|-----|--|
| \$100,000—Advocate \$50,000—Hero | | | \$7,500—Defender | | | |
| | | | \$5,000—Guardian | | | |
| I am / We are unable to | attend but wish to be a pro | ogram sponsor | by making a fully tax-de | eductible contribution of \$2,5 | 00. | |
| I wish to purchase one ticket to the virtual event for \$500. | | | My company will match my gift; the form is enclosed. | | | |
| Contact information: | | | | | | |
| Company or individual name (fo | r program listing): | | | | _ | |
| Contact name (if different from a | above): | | | | - | |
| Company: | | | | | _ | |
| Address: | City: | | State: | ZIP: | _ | |
| Telephone (day): | Fax: | | Email: | | - | |
| Payment details: | | | | | | |
| Please indicate preference | e for the total amount of: | | _ | | | |
| Check payable to Rol | oert F. Kennedy Human Ri | ights | Credit card (VISA / M | 1C / AmEx) | | |
| Card number: | | | Ехр: | CVV/CSC: | _ | |
| Name on card: | | Signature | : | | _ | |
| Your donation supports the | e work of RFK Human Rig | hts. You may | designate 10% of your | gift to: | | |
| Racial and Economic Equity Fund | | luman Rights COVID-19 Fund | | Young Leaders' Huma Rights Defenders Fund | | |

For additional information, please contact Melissa Cather at cather@rfkhumanrights.org or (617)-593-5588.

Please complete this form and send with your payment to: Robert F. Kennedy Human Rights P.O. Box 982, New York, NY 10272