



PLEASE JOIN THE
**DALLAS COUNTY REPUBLICAN
 PARTY**

FOR AN INTIMATE LUNCHEON
 WITH SPECIAL GUEST

GOVERNOR RICK PERRY

THURSDAY, JULY 30, 2009
 11:45 AM HOST RECEPTION ★ 12:15 PM LUNCHEON
 EDISON'S ★ 1724 COCKRELL STREET, DALLAS, TEXAS 75215

YES! I WANT TO ATTEND THE LUNCHEON WITH GOVERNOR PERRY!

- SENATE HOST** \$5,000
 Table for ten including Host Reception & Photo for eight, Recognition & 2009 Eagle Membership* for two
- CONGRESSIONAL HOST** \$2,500
 Table for ten including Host Reception & Photo for six, Recognition & 2009 Eagle Membership* for two
- EAGLE HOST COUPLE** \$1,500
 Preferred seating for two including Host Reception & Photo, Recognition & 2009 Eagle Membership* for two
- EAGLE HOST** \$1,000
 Preferred seating for one, including Host Reception & Photo, Recognition & 2009 Eagle Membership* for one
- GUEST** \$100
 General admission seating for one. Number of individual tickets ____.
- SPONSOR A PRECINCT CHAIR** \$100
 I would like to show my appreciation for our DCRP Precinct Chairs by Sponsoring a Precinct Chair so that he/she can attend the luncheon at no additional cost. Number of individual tickets ____.

** Individual Eagle Membership includes one complimentary guest to each Dallas County Republican Party event in 2009.*

NAME OF GUEST(S): _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP CODE: _____

PHONE: _____ EMAIL: _____

OCCUPATION: _____ EMPLOYER: _____

Federal law requires political committees to use best efforts to obtain the name, mailing address, employer and occupation for each individual whose contributions exceed \$200 in a calendar year. Contributions are not deductible for Federal income tax purposes. Contributions will be deposited into the Dallas County Republican Party Federal Account unless prohibited and shall be subject to federal contribution limits. Corporate contributions are accepted and will be deposited into the Dallas County Republican Party Corporate Account to the extent permissible under state law. Contributions from foreign nationals are prohibited.

CREDIT CARD CONTRIBUTION: Corporate Credit Card? Yes No
 Card Type: AMEX VISA Master Card

Amount: \$ _____ Card#: _____

Expiration Date: _____ Signature: _____

Please make individual, corporate or PAC checks payable to:
 DCRP 10100 North Central Expressway, Suite 175, Dallas, Texas 75231 Fax: 214-363-0867