



Impact 100
4010 Executive Park Drive
Suite 100
Cincinnati, Ohio 45241

www.impact100.org

Impact 100 2016/2017 Annual Sponsorship Form

Check one.

- Big Impact! Sponsor \$5,000 (category exclusive)**
- Impact Advocate Sponsor \$2,500**
- Friend of Impact Sponsor \$1,000**

Company Name: _____
As you wish it to appear for recognition purposes

Contact Name: _____

Company Address: _____

City: _____ State: _____ Zip: _____

Daytime Phone: _____ Fax: _____

E-mail: _____

I have enclosed a check in the amount of \$ _____
Please make checks payable to Impact 100

Please bill the company/me for \$ _____
 annually semiannually
Check one.

All Sponsorships must be paid in full by **August 5, 2016**

I/We are unable to become a sponsor at this time. Please accept our tax-deductible contribution of \$ _____ in support of Impact 100.

For more information regarding Impact 100 sponsorship opportunities, please call (513) 260-4084 or email Kelly Mahan at kellymahan23@gmail.com