

Thursday, May 23, 2019

Renaissance Cleveland Hotel – Grand Ballroom

24 Public Square, Cleveland, Ohio 44115

Doors Open at 11:30 a.m. | Program begins promptly at noon

Support the *Cleveland-Marshall Law Alumni Association* and its
Scholarship Fund by securing your sponsorship or ticket at the 2019
Annual Recognition Luncheon.

*All proceeds benefit scholarship funds for Cleveland-Marshall Law
students.*

*The 2019 Luncheon will honor
Alumni of the Year:*



**TERESA
METCALF BEASLEY**

C|M|LAW 1992

Member,
McDonald Hopkins LLC



JUDGE JOHN J. RUSSO

C|M|LAW 1992

Administrative and Presiding
Judge, Cuyahoga County
Common Pleas Court

REGISTER:

To purchase Sponsorships, Tables,
Tickets and/or Ads:

1. Register ONLINE at
www.csulaw.org/ar1

OR

**2. Complete this form and mail your
check along with the form to:**

Cleveland-Marshall Law
Alumni Association
2121 Euclid Avenue, LB126
Cleveland, Ohio 44115

Please email Table Attendee Names
and Ad Artwork by **April 18** to:
CmlaaAr1@gmail.com

Black and White Ad Specifications

- Full-page Ad (8" h by 5" w – Portrait)
- 1/2-page Ad (5" w by 3 7/8" h – Landscape)
- 1/4-page Ad (2 3/8" w by 3 7/8" h – Portrait)

Tax deductible information can be
found on: www.csulaw.org/ar1.

PLEASE CONSIDER ONE OF OUR 2019 SPONSORSHIP LEVELS!

☐ **GOLD SPONSOR** (Includes Table of 10, Full-page Ad in luncheon program, special recognition, priority seating and private pre-luncheon reception with honorees) @ **\$1750**

☐ **Can't attend?** Become a **SILVER SPONSOR** (Includes Full-page Ad in luncheon program and special recognition at luncheon) @ **\$1250**

☐ **BRONZE SPONSOR** (Includes 4 luncheon tickets, Half-page Ad in luncheon program and special recognition at luncheon) @ **\$750**

☐ **TABLE SPONSOR** (Includes 10 luncheon tickets) @ **\$500**

☐ **LUNCHEON TICKET(S)** @ **\$50** each

An AD is a great way to show your support! ☐ 1/2-PAGE AD @ **\$450** ☐ 1/4-PAGE AD @ **\$250**

☐ I would like to contribute \$_____ to the scholarship fund
100% will provide financial support to Cleveland-Marshall students.

Name: _____ Firm: _____

Address: _____

Street City State Zip

Email: _____ Phone: _____

Method of payment: ☐ Enclosed is my check payable to CMLAA

☐ Charge \$ _____: ☐ Visa ☐ MasterCard ☐ American Express

Name on Card _____ Signature _____

Account Number _____ Exp. Date _____ Sec. Code _____

For additional information, email CmlaaAr1@gmail.com or call 216-687-2368.