



**Tuesday, January 12, 2016**

6:00 p.m. Program and Awards Ceremony

7:00 p.m. Cocktail Reception

Maxine Goodman Levin College of Urban Affairs Atrium  
1717 Euclid Avenue, Cleveland, Ohio

Honoring: Bruce H. Akers | Allan C. Krulak  
Dennis M. Lafferty | James L. Mason

*In Tribute Supports the Mercedes Cotner Endowed  
Scholarship for Levin College Undergraduate and  
Graduate Students*

# In Tribute

## TO THE PUBLIC SERVICE SCHOLARSHIP & AWARD EVENT

### Levels of Participation

*Please select a Level of  
Participation*

**GOLD – \$10,000**

12 tickets, event signage, program listing  
and video recognition (\$9,724 is tax  
deductible)

**SILVER – \$7,500**

10 tickets, event signage, program listing  
and video recognition (\$7,270 is tax  
deductible)

**BRONZE – \$5,000**

8 tickets, event signage, program listing and  
video recognition (\$4,816 is tax deductible)

**SCHOLARSHIP SUPPORTER – \$2,500**

6 tickets, program listing (\$2,362 is tax  
deductible)

**DEAN'S CIRCLE – \$1,000**

4 tickets, program listing (\$908 is tax  
deductible)

**SUPPORTER – \$500**

2 tickets, program listing (\$454 is tax  
deductible)

**PATRON – \$250**

1 ticket, program listing  
(\$227 is tax deductible)

**INDIVIDUAL SEAT(S) – \$100**

1 ticket (\$77 is tax deductible)

**CSU ALUMNI SEAT(S) – \$75**

1 ticket (\$52 is tax deductible)

**STUDENT SEAT(S) – \$25**

1 ticket

**PLEASE RSVP BY TUESDAY, DECEMBER 29**

To register online, visit: <https://www.csuohio.edu/urban/intribute/In-Tribute-2016>

OR

**Mail this response form to:**

In Tribute to the Public Service  
Maxine Goodman Levin College of Urban Affairs  
2121 Euclid Avenue UR 335  
Cleveland, OH 44115-2214



Maxine Goodman Levin  
College of Urban Affairs

2121 Euclid Avenue, UR 335  
Cleveland, Ohio 44115-2214

\*Name (please print) \_\_\_\_\_ Name on Badge \_\_\_\_\_

\*\*Company Name \_\_\_\_\_

Total # of People Attending \_\_\_\_\_

Full Name of Guest(s) \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone/E-mail \_\_\_\_\_

*\*Name as you would like it to appear in the program. \*\*List company name for corporate  
donations as you would like it to appear in the program.*

**METHOD OF PAYMENT:**

I can attend and would like to contribute \$ \_\_\_\_\_

I cannot attend but would like to contribute \$ \_\_\_\_\_

My check is enclosed. Please make checks payable to: In Tribute to the Public Service/CSU Foundation

Charge my credit card:  Discover  MasterCard  VISA

Name on Card \_\_\_\_\_

Billing Address (if different from above) \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Signature \_\_\_\_\_

Card Number \_\_\_\_\_ Exp. Date \_\_\_\_\_ CVW Code \_\_\_\_\_

**Questions?** Email: [intribute@csuohio.edu](mailto:intribute@csuohio.edu) or Call: 216.687.2254