

Yes, I want to purchase ticket(s) to the



Dinner \$100 ea. (\$125 Mar. 1)

PLEASE COMPLETE FULLY:

Name _____ e-mail _____

Address _____

Phone _____ Occupation _____

Date _____ Check Amount _____ Check # _____

Entrees Rosemary Chicken Breast * Sliced Beef Sirloin w/red wine sauce
Tilapia w/lemon sauce * Vegetable Lasagna

Names (Please print)

Meal Choice

- 1. _____ [Chicken] [Beef] [Fish] [Vegetarian]
2. _____ [Chicken] [Beef] [Fish] [Vegetarian]
3. _____ [Chicken] [Beef] [Fish] [Vegetarian]
4. _____ [Chicken] [Beef] [Fish] [Vegetarian]
5. _____ [Chicken] [Beef] [Fish] [Vegetarian]

FRIENDS OF DEMOCRATS (optional)

[Print as to appear in Program Book]

1 Name (Mary Smith)

\$25 _____

2 Names (John & Mary Smith)

\$30 _____

\$ _____ Total Amount Enclosed

Please return this form and your check(s) - payable to LCDEC - to Rose Fitzpatrick
P. O. Box 492034, Leesburg, FL 34749 or call/email for pick-up 630-291-3667
greaterleesburgdems@gmail.com