

14TH ANNUAL EVENING IN THE HEART OF ALEXANDRIA
ALEXANDRIA VOLUNTEER BUREAU

RSVP

NAME: _____

ADDRESS: _____

CITY, STATE, ZIP: _____

PHONE: _____ EMAIL: _____

PLEASE RESERVE ____ TICKET(S) AT \$75 PER PERSON/\$125 PER COUPLE
FOR A TOTAL OF \$ ____ .

PLEASE SEND ME INFORMATION ABOUT SPONSORSHIP OR DONATION OPPORTUNITIES.

I REGRET THAT I CANNOT ATTEND, PLEASE ACCEPT THE ENCLOSED CONTRIBUTION TO
THE ALEXANDRIA VOLUNTEER BUREAU OF \$ ____ .

PLEASE RETURN RESERVATION AND PAYMENT IN ENVELOPE PROVIDED AND MAIL TO AVB,
2210 MOUNT VERNON AVENUE, ALEXANDRIA, VA 22301

FOR MORE INFORMATION, CONTACT AVB AT
(703) 836-2176 OR MAIL@ALEXANDRIAVOLUNTEERBUREAU.ORG