

# An Evening of Laughter

to benefit

JEWISH FAMILY SERVICE OF METROWEST

honoring

FRED COHEN, SETH COHEN, ERICA COHEN RECHTWEG

and JFS HOLOCAUST SERVICES

THURSDAY, JUNE 6, 2019

## -Tickets-

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> <b>BENEFACTOR</b><br><b>\$360 per person 6:30 pm</b><br><i>(includes cocktails, hors d'oeuvres, dessert and tickets in Benefactor Section)</i> | <input type="checkbox"/> <b>GENERAL</b><br><b>\$180 per person 7:00 pm</b><br><i>(includes cocktails, hors d'oeuvres, dessert &amp; tickets in General Seating section)</i> | <input type="checkbox"/> <b>YOUNG PROFESSIONAL</b><br><b>\$118 per person 7:00 pm</b><br><i>(includes cocktails, hors d'oeuvres, dessert &amp; tickets in General Seating section)</i> |
|---|---|--|

## -Journal-

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> <b>Sapphire Benefactor Page \$10,000</b><br><i>(includes Sapphire listing &amp; 6 tickets in Benefactor Section &amp; reception*)</i> | <input type="checkbox"/> <b>Jade Benefactor Page \$2,500</b><br><i>(includes Jade listing &amp; 2 tickets in Benefactor Section &amp; reception*)</i> | <input type="checkbox"/> <b>Turquoise Full Page \$1,000</b>        |
| <input type="checkbox"/> <b>Ruby Benefactor Page \$5,000</b><br><i>(includes Ruby listing &amp; 4 tickets in Benefactor Section &amp; reception*)</i>          | <input type="checkbox"/> <b>Amethyst Page \$1,500</b><br><i>(includes Amethyst listing &amp; 2 tickets in Benefactor Section &amp; reception*)</i>    | <input type="checkbox"/> <b>Coral Half Page \$600</b>              |
|  |   | <input type="checkbox"/> <b>Onyx Quarter Page \$360</b>            |
|  |   | <input type="checkbox"/> <b>Friends Listing \$180 (names only)</b> |

**- JOURNAL CLOSING DATE: MAY 6 2019 -**

Name: \_\_\_\_\_  
*(as you wish it to appear in print)*

Address: \_\_\_\_\_ e-mail: \_\_\_\_\_

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

Contact Person: \_\_\_\_\_ Telephone: \_\_\_\_\_

- My check is enclosed made payable to **JFS of MetroWest** (for tickets, journal, or both)  
 Please charge to my  VISA  MasterCard  American Express (for tickets, journal, or both)

Acct # \_\_\_\_\_ Expiration Date: \_\_\_\_\_ Security Code: \_\_\_\_\_

Name of Cardholder: \_\_\_\_\_ Signature: \_\_\_\_\_

- My journal copy is attached  My journal copy is being emailed to [sheller@jfsmetrowest.org](mailto:sheller@jfsmetrowest.org)

**I DON'T WISH TO TAKE AN AD AND CANNOT ATTEND, BUT I'D LIKE TO MAKE A CONTRIBUTION \$ \_\_\_\_\_**

**Return to: Lois Kaish and Lisa Lindauer**  
Jewish Family Service of MetroWest  
256 Columbia Turnpike, Suite 105, Florham Park, NJ 07932  
Phone: 973-765-9050 Fax: 973-765-0195 Email: [sheller@jfsmetrowest.org](mailto:sheller@jfsmetrowest.org)

Solicited by: \_\_\_\_\_

\* Due to IRS regulations, tickets will not be included for ads paid from foundations or donor advised funds  
Jewish Family Service of MetroWest is a 501-C-3 non-profit organization (tax ID# 221-687-995). All contributions are tax-deductible as applicable under IRS guidelines.



**Jewish Family Service**  
of MetroWest New Jersey

At every age, at every stage, we are here to help.