VALUING	PLEASE RESERVE:					
HOUSING	\$5,000 DEAL CLOSERS 10 tickets, special event recognition and VIP seating					
COMMUNITIES	\$2,000 CONSTRUCTION CREW 10 tickets, special event recognition and VIP seating					
DEVELOPMENT WITHOUT	\$1,000 BRICKLAYERS 5 tickets and special event recognition					
VISPLACEIVIENT Wednesday	\$ 250 GROUNDBREAKERS 1 ticket					
November 10, 2004 5:30 – 8:00 PM	\$ 150 NONPROFIT COMMUNITY BUILDERS 1 ticket					
The Art Institute of Chicago	Please print names of guests on the back of this card					
Name (please print)						
Title						
Organization						
Address						
City	State Zip					
Daytime Telephone	e-mail					
We cannot attend but wish to contribu	ute \$in support of the Chicago Rehab Network.					
Enclosed is my check in the amount Please make checks payable to Chicago Re						
Please bill my credit card: Visa	MasterCard American Express					
Card Number	Expiration Date					
Cardholder's Name	Signature					
PLEASE RESPOND BY MONDAY, NOVEMBER 1, 2004. Tickets will not be issued. Names will be placed on the guest list. For more information, please call 312-751-0147, ext 236.						

The Chicago Rehab Network is a non-profit organization under Section 501c(3) of the Internal Revenue Code. All contributions made over the value of the evening's entertainment are tax deductible.

Please print names of guests below:

1.			
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