

**STATE REPRESENTATIVE AL RILEY
38TH HOUSE DISTRICT
HUMAN SERVICES FAIR
EVENT PARTICIPATION FORM**

COMPANY/ORGANIZATION INFORMATION

Company/Org.: _____
Representative: _____
Address: _____ City, Zipcode _____
Email Address: _____
Phone#: _____ Fax#: _____

BOOTH

Please check all that apply:

Type of services your organization provides: Senior Services Youth Services
 Food Pantry Mental Health Services Transportation Services Disability Services
 Other _____

Any special booth needs?: _____

SPONSORSHIP/DONATIONS

Goods/Prizes: Bottled Water Pens Refreshments Other _____

Donations: \$50 \$75 \$100 Other _____

DEADLINES

Event applications are due August 8, 2008:

State Representative Al Riley
600 Holiday Plaza Drive, Suite 535
Matteson, Illinois 60443
Fax# 708.283.0440



If you have any questions, please contact Cherise Montgomery at my district office at 708.283.0400.