

Please make checks payable to:

Didi Hirsch Community Mental Health Center (Tax ID# 951816023) and mail to DHCMHC, C/O Paloma Event Management, 909 N. Westbourne Drive, Suite 107, Los Angeles, CA 90069

My guests are:

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____



INQUIRIES

PALOMA Event Management

Phone (310) 855-9223 Fax (310) 855-7263 ErasingTheStigma@aol.com

Los Angeles Police Commission Charitable Services Section



INFORMATION CARD

Endorsed Agency

DIDI HIRSCH COMMUNITY MENTAL HEALTH CTR
4760 South Sepulveda Blvd., Culver City, CA 90230
(310) 390-0612

ACTIVITY: Leadership Awards Luncheon, May 3, 2001, at the Regent Beverly Wilshire Hotel, Beverly Hills. Invitations from \$150 to \$25,000. Cash donations will be solicited.

PURPOSE: Net proceeds to support the Center's ongoing programs at the mental health facility.

EXPENSE: Estimated at \$74,850 for printing, postage, stationery, telephone, equipment rental, food, decorations, awards, consultants, and miscellaneous expenses.

PREVIOUS ACTIVITY: 2000 luncheon raised \$205,437 from gross receipts of \$300,120 at an expense of \$94,683 or 31.5% of gross receipts.

CHAIR: Kila S. Curry, Ph.D., Executive Director



SOLICITATION RESTRICTED TO THE HOURS OF 8 A.M. - 8 P.M.
AN EQUAL EMPLOYMENT OPPORTUNITY - AFFIRMATIVE ACTION EMPLOYER

Sponsorship Opportunities

- Presenting Sponsor**\$25,000
Two premier tables of ten — acknowledgment at the event — two presenting sponsor pages in Commemorative Journal. All guests invited to special reception.
- Benefactor**\$10,000
One premier table of ten — benefactor page in Commemorative Journal. All guests invited to special reception.
- Patron**\$5,000
One preferred table of ten — patron page in Commemorative Journal. Five guests invited to special reception.
- Advocate**\$2,500
One preferred table of ten — advocate page in Commemorative Journal. Two guests invited to special reception.
- Sponsor**\$1,000
Two preferred seats — name listing in Commemorative Journal.
- Friend**\$500
Two preferred seats.
- Individual Tickets**\$150
Please reserve _____ individual ticket(s)

Your contribution is deductible as allowable by law.

Commemorative Journal

Inside Back Cover3,000
Full Page1,000
Half Page500
Quarter Page250

Tribute pages are 100% tax-deductible. We encourage camera-ready art for the Commemorative Journal. For tributes requiring our assistance, please include message in an attachment or send via facsimile to (310) 855-7263. **Copy Deadline is April 1, 2001.**

Please List My Name As _____

Name _____

Company _____

Address _____

City/State/Zip _____

Day Phone _____ Eve Phone _____

Fax _____

I/we are unable to attend, but would like to help with a contribution of \$ _____

I/we have enclosed a check in the amount of \$ _____.

For your convenience, guests and contributors may pay by credit card.

Please charge \$ _____ to my: Visa Master Card Amex

Card information (please print):

Card #: _____ Exp. Date: _____

Signature: _____