

ANNUAL BREAKFAST SPONSORSHIP LEVELS

| | \$2,500 naterials about the event | (\$2,100 tax deductible) |
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| Logo on a scrollLogo in the prin | ing PowerPoint presentation | |
| Priority seating | programs | |
| _ | \$1,000 ing PowerPoint presentation he printed programs ed seating | (\$600 tax deductible) |
| _ | \$500 ing PowerPoint presentation he printed programs ed seating | (\$100 tax deductible) |
| Table HostName listed in the | \$400 he printed programs | (no tax deduction) |
| | Please indicate your level of | sponsorship \$ |
| Sponsoring Organiza | tion or Individual(s) | ı would like it to appear on printed materials. |
| | Contact Name | |
| | Phone | |

Each level of sponsorship includes a table for 10 at the breakfast. If you wish to make a donation and not purchase a table, you may submit the tax-deductible amount for each level of sponsorship and receive the recognition listed.

Email

Please email your completed form to Rosemary Salerno at <u>rsalerno4916@gmail.com</u>. Send check payments and a copy of this form to the Northland Community Foundation at 1055 Broadway Blvd., Suite 130, Kansas City, MO, 64105.

We look forward to seeing you at Argosy Casino Hotel & Spa on Friday, September 18, 2020 from 7:30 to 9:00 a.m. as we celebrate philanthropy in the Northland.