

MENTAL HEALTH
ADVOCACY
SERVICES

Annual Celebration

Sponsorship

Thursday, September 17, 2009, 6-8 p.m.
At the Offices of Munger, Tolles, & Olson LLP

Annual Celebration

Event Information

Join us for our Third Annual Celebration!

What:

Reception and awards presentation

When:

Thursday, September 17, 2009
6:00 p.m. – 8:00 p.m.

Where:

The Offices of Munger, Tolles & Olson LLP
355 South Grand Avenue, 35th Floor
Los Angeles CA 90071-1560

Honoring:

James Allen

Deputy Director, Los Angeles County Department of Mental Health, Retired

Terri Cheney

Author of the bestselling memoir *Manic*

Contact:

Nicole Roberts, Development Manager
213-389-2077, ext. 25, or nroberts@mhas-la.org
Mental Health Advocacy Services, Inc.
3255 Wilshire Blvd., Suite 902
Los Angeles, CA 90010

Annual Celebration

2008 Sponsors

Platinum

Gibson, Dunn & Crutcher LLP*

Munger, Tolles & Olson LLP*

Gold

Lucy and David Eisenberg

Greenberg Glusker

Proskauer Rose LLP

Skadden, Arps, Slate, Meagher & Flom LLP

Silver

Jane and Ken Anderson

Casey Carrington, Esq.

Mental Health America of Los Angeles

Gregory Weingart, Esq.

Wells Fargo

Bronze

Rick and Fabienne Guerin

Doug L. Hall & Desiree D. Pierce, CFP

Harris-Ginsberg LLP

Hunton & Williams LLP

Shirley and Matthew Kirby

Annual Celebration

Sponsorship Opportunities

Platinum.....\$10,000

- ◆ 20 tickets to the event
- ◆ Special recognition in the invitation*
- ◆ Special recognition in the Tribute Journal
- ◆ Full-page ad in the Tribute Journal
- ◆ Special acknowledgement during the program

Gold.....\$5,000

- ◆ 15 tickets to the event
- ◆ Listing in event invitation *
- ◆ Special recognition in the Tribute Journal
- ◆ Full-page ad in the Tribute Journal

Silver.....\$2,500

- ◆ 10 tickets to the event
- ◆ Listing in event invitation *
- ◆ Special recognition in the Tribute Journal
- ◆ Half-page ad in the Tribute Journal

Bronze.....\$1,000

- ◆ 6 tickets to the event
- ◆ Listing in event invitation*
- ◆ Special recognition in the Tribute Journal
- ◆ Half-Page Ad in the Tribute Journal

All sponsors will be recognized on the MHAS website.

SPONSORSHIP DEADLINE: August 24, 2009

**NOTE: Sponsorships confirmed on or before July 17, 2009, will be acknowledged in the event invitation.*

Tribute Journal

Full-Page..... \$500
Half-Page \$250

All pages will be black and white. Artwork must be in digital format and received no later than August 24, 2009.



Annual Celebration

Sponsorship Confirmation

Contact Name: _____

Firm: _____

Address: _____

City/State/Zip Code: _____

Phone: _____ Fax: _____

Email: _____

YES, I would like to sponsor MHAS' Annual Celebration:

- \$10,000 Platinum Sponsor (includes 20 tickets)
- \$5,000 Gold Sponsor (includes 15 tickets)
- \$2,500 Silver Sponsor (includes 10 tickets)
- \$1,000 Bronze Sponsor (includes 6 tickets)

(Individual tickets will be available for \$150 each.)

Please indicate your name or firm's name EXACTLY as you would like it to appear:

SPONSORSHIP DEADLINE: August 24, 2009*

*(*Tribute Journal artwork must be received by this date)*

DEADLINE FOR INCLUSION IN EVENT INVITATION: July 17, 2009

- Check enclosed (make checks payable to Mental Health Advocacy Services).
- Please charge my Visa Mastercard American Express Discover

Card #: _____ Exp. Date: _____

Name as it appears on credit card: _____

Signature: _____

Return this completed form with your check or credit card information to:
Mental Health Advocacy Services, Inc., 3255 Wilshire Blvd., Suite 902, Los Angeles, CA 90010
or Fax to 213-389-2595.

Questions? Contact Nicole Roberts at 213-389-2077, ext. 25, or nroberts@mhas-la.org.

Annual Celebration

Tribute Journal

Contact Name: _____

Firm: _____

Address: _____

City/State/Zip Code: _____

Phone: _____ Fax: _____

Email: _____

I would like to purchase a Tribute Journal page for MHAS' Annual Celebration:

\$500 Full-Page

\$250 Half-Page

All pages will be black and white. Artwork must be in digital format and received no later than **August 24, 2009**.

Check enclosed (make checks payable to Mental Health Advocacy Services).

Please charge my Visa Mastercard American Express Discover

Card #: _____ Exp. Date: _____

Name as it appears on credit card: _____

Signature: _____

Return this completed form with your check or credit card information to:

Mental Health Advocacy Services, Inc.

3255 Wilshire Blvd., Suite 902

Los Angeles, CA 90010

or Fax to 213-389-2595.

Questions? Contact Nicole Roberts at 213-389-2077, ext. 25, or nroberts@mhas-la.org.