\$75,000 Presenting \$25,000 Gold	☐ \$50,000 Platinum ☐ \$10,000 Silver
☐ \$5,000 Bronze	☐ \$500 Individual Ticket
☐ I/We cannot attend, but we	ould like to make a
tax-deductible donation of	\$
☐ Enclosed is a check made p	payable to
Visiting Nurse Health System	em
☐ I would like to pay with the	a following credit card:
• •	•
	☐ Amex ☐ Discover
Card #	
Expiration Date	Security Code
Signature	
☐ Invoice me. Name	
Address	
City State _	Zip Code
Phone Number	
For more informat	ion, please contact:
D-1	

\(\sum\_{\text{I/We would like to support at the following level-}\)

Dabney Hollis at 404.215.6011 or dabney.hollis@vnhs.org or Stephanie Jones at 770.818.1493 or stephaniegjones@me.com

#### Mail to:

Visiting Nurse Health System / Hospice Atlanta Attn: Advancement 5775 Glenridge Drive NE, Suite E200 Atlanta, GA 30328

Thank you for your generous support of Hospice Atlanta. Your contribution is tax deductible less \$150 per person as required by the IRS.

Senator Isakson is only helping solicit federally permissible funds.



#### Presenting \$75,000

VIP Reception before the event for 20; two premier tables for ten; mention as Presenting Sponsor; acknowledgment, logo and full-page ad in program; complimentary parking for all guests; Presenting Sponsor of the fall 70<sup>th</sup> Celebration.

## Platinum \$50,000

VIP Reception before the event for 20; two premier tables for ten; acknowledgment, logo and half-page ad in program; complimentary parking for all guests.

# Gold \$25,000

V1P Reception before the event for ten; one premier table for ten; acknowledgment and logo in program; complimentary parking for all guests.

# *Silver* \$10,000

One premier table for ten; acknowledgment and logo in program; complimentary parking for all guests.

### Bronze \$5,000

One table for ten; acknowledgment and logo in program.

Individual Ticket \$500

