

Plano Child Development Center

Cordially invites you to attend our

"You are the Apple of Our Eyes"

43rd Annual Vision Care Benefit

**Friday, the Twelfth Day of October
Two Thousand and Eighteen**

**Chateau Del Mar
8301 West 95th Street
Hickory Hills, IL**

**Silent Auction – Six Thirty p.m.
Dinner – Seven Thirty p.m.**

No tickets required, seats assigned at the door

Corporate and Private Tax-Deductible Sponsorship/Contributor Opportunities
Include:

- 🌀 **Apple of Your Eye Sponsor:** Your \$20,000 donation will help sponsor 20 patient's vision therapy programs. You will receive:
 - o Corporate name/logo on the back page of program book and on tables
 - o Special sponsor award presented during program
 - o Corporate acknowledgement in Plano newsletter and website
 - o Table of ten (10) dinner reservations

- 🌀 **Apple Orchard Sponsor:** Your \$15,000 donation will sponsor 500 clinic-based vision therapy sessions. You will receive:
 - o Corporate name/logo printed in website, program book and on table
 - o Special sponsor award presented during program
 - o Five (5) dinner reservations

- 🌀 **Apple Tree Sponsor:** Your \$10,000 will sponsor school comprehensive vision exams for approximately 100 students. You will receive:
 - o Corporate name listed in website, program book and on table
 - o Sponsorship acknowledgement at one school based vision screening
 - o Four (4) dinner reservations

- 🌀 **Apple Blossom Sponsor:** Your \$5,000 donation will sponsor several vision health awareness workshops, reaching approximately 500 participants. You will receive:
 - o Corporate table/sponsor name on table at benefit, listing in program book
 - o Sponsorship acknowledgement at vision health awareness workshops
 - o Three (3) dinner reservations.

🌀 **Apple Seed Sponsor:** Your \$2,500 donation will sponsor several free health fair vision screenings, reaching approximately 800 participants. You will receive:

- o Listing in the program book
- o Sponsorship acknowledgement at one vision health awareness workshop
- o Two (2) dinner reservations.

🌀 **Apple Sponsor Friend.** Your \$1,000 donation will help underwrite the cost of our fundraising efforts

- o Listing in our program book

The following options are available for patrons:

- Gold Apple Donor** \$500
- Red Apple Donor** \$400
- Bronze Apple Donor** \$300
- Yellow Apple Donor** \$200
- Green Apple Donor** \$100
- Dinner Reservations** \$75.00 each
- June P. Elzia Vision Therapy Scholarship Fund \$60**
- _____ Reservations are **\$75.00** each (No tickets required – seats assigned at door)
- Golden Apple and Greater Ads are available

We are also seeking your support for our silent auction, to be held at our annual benefit dinner. Your goods or services will be used to help us bridge the ever-widening gap between the costs of providing this service and the resources provided by small grants and patient fees. Most of our patients are economically disadvantaged and pay on a sliding-fee scale.

Please make checks payable to and Mail the response form to:

**Plano Child Development Center
5401 S. Wentworth, Suite 14A
Chicago, IL 60609-6300**

All contributions are tax-deductible to the extent allowed by law. Plano is a not-for-profit tax-exempt organization under Section 501(c)(3) of the Internal Revenue Code.

**For more information, please contact
Mrs. Kimberly Henry or Dr. Stephanie Johnson-Brown at
773-924-5297 or email us at info@planovision.org**

Please complete and mail to us, at your earliest convenience:

Deadline for acknowledgement in our program book for the 42nd Annual Vision Care Benefit is **September 01, 2018.**

Name _____

Address _____

City _____ State _____ Zip _____

Telephone Number _____ Email _____

PLEASE INDICATE YOUR LEVEL OF SPONSORSHIP:

___ Apple of Your Eye, \$20,000

___ Apple Orchard, \$15,000

___ Apple Tree, \$10,000

___ Apple Blossom, \$5,000

___ Apple Seed, \$2,500

___ Apple Friend, \$1,000

___ Apple Table, \$750

___ Gold Apple, \$500

___ Red Apple, \$400

___ Bronze Apple, \$300

___ Yellow Apple, \$200

___ Green Apple, \$100

___ June P. Elzia Vision Therapy Scholarship Fund, \$60

___ Ticket(s) @ \$75 each

___ Other in the amount of \$ _____

___ Silent Auction Item _____

___ Total enclosed \$ _____

Please make checks payable to:

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***MasterCard, Visa and Discover now accepted
online at www.planovision.org***