

## ANNUAL WINTER CONFERENCE





Franklin County December 4-6, 2019

## SPONSORSHIP FORM

COMPANY				
CONTACT PERSON		TITLE		
STREET ADDRESS		CITY	STATE	ZIP
PHONE ()	FAX (	)	E-MAIL	
	ence is an opportunity		<u> </u>	nty staff to learn about new ways nt. Please consider one of the
Wednesday evening reception color, outside back cover ad in booth.  THURSDAY RECEPTION AND I Donate \$3,500 as the exclusiv Additionally, it will be recogning program*, four complimentar THURSDAY DUELING PIANOS	e sponsor for this speci a. Additionally, it will be a the program*, four co MUSIC: \$3,500 e sponsor for the recep zed throughout the cor y tickets to the Thursd	ial reception and entertains e recognized throughout the amplimentary tickets to the other of the action and music. Your logo angerence. This sponsorship ay reception and banquet of the this sponsorship at the action and banquet of the this sponsorship at the thin sponsorship at the this sponsorship at the thin sponsorship at the this sponsorship at the this sponsorship at the thin sponsorship at the thin sponsorship at the this sponsorship at the thin spons	ment. Your company will have its e conference. This sponsorship le Wednesday reception and a 25% will be exclusively displayed at th level also includes a full-page colored a trade sh	% discount on a trade show  Thursday evening reception.  Tor, inside front cover ad in the ow booth.
comedy show, with our county conference. This sponsorship is reception and banquet and a good SPONSOR: \$2,000-2,999 Donate \$2,000 or more to supp	y family! Your logo will evel includes a full-pag 25% discount on a trad ort the conference and	be exclusively displayed dige color, inside back cover of the show booth.  If your company will have it.	uring the event. Additionally, it was in the program*, four complimate in the program in the pro	
	ort the conference and		s logo prominently displayed at c and white ad in the program* a	our Thursday luncheon and and two complimentary tickets to
			ogo prominently displayed at ou and white ad in the program* an	r Thursday luncheon and ad one complimentary ticket to the
throughout the conference. <b>AS A COUR</b>	t the conference and y	O, WE REQUEST THAT C	ogo prominently displayed at out OMPANIES REFRAIN FROM E NQUET ON THURSDAY EVEN	NTERTAINING
My company would like to b	e a		sponsor for the amount of \$	
AUTHORIZING SIGNATURE			ITI F	

RETURN THIS COMPLETED FORM & YOUR CHECK PAYABLE TO THE CCAO/CEAO CONFERENCE ACCOUNT BY **OCTOBER 31, 2019** TO: CCAO/CEAO, ATTN: MARY JANE NEIMAN, 209 EAST STATE STREET, COLUMBUS, OH 43215-4309 OR FAX 614/221-6986.

\*For more information, contact Mary Jane Neiman, CCAO Public Relations Associate, at (614) 220-7979 or (888) 757-1904 ext. 302.

Logo and ad copy deadline is October 31, 2019.