



THE PEGGIE & PAUL
SHEVLIN FAMILY
FOUNDATION

Promoting hope by supporting the practical needs
of addicted persons in early recovery.

August 24, 2019

Dear Treatment Centers,

It has been a privilege collaborating with you as we serve those affected by addiction. Working with your after-care coordinators, we've provided your most vulnerable clients with critical services including: recovery house scholarships, food cards, cell phones, Lyft transport and other advocacy needs. As you know, funding this gap is essential if clients are to accomplish their treatment goals. **But NOW we need your help!**

On October 16th we will open our fifth year serving those affected by addiction at **our 4th Annual Gala & Fundraiser**. This is our largest fundraiser of the year. Proceeds will directly support our mutual clients as they build their recovery. As a collaborating treatment center, please take advantage of the **Gala Sponsorship Levels crafted just for you** (see attached). Can you take a moment now to review? What level might be a best fit?

I will be following up with you personally to answer your questions, record your level of commitment and (hopefully:) make payment arrangements (which can be flexible). I should also note that all sponsorships, add-ons and artwork must be received by **September 30th** to be included in our program.

Together we can continue to make a difference in the lives of those striving to heal from addiction. Thank you, in advance, for your generous support as it is critical to our future work.

Gratefully,

Christine Shevlin Rizzo
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**Treatment Center
Special *GALA*
Sponsorship Offer**

COLLABORATOR LEVEL: - \$1000 *Donation includes:* \$ _____

- 3 Gala tickets
- Special ‘Shout out’ during event and onsite signage
- Half- Page AD in program
- Website, social media, and digital signage

PARTNER LEVEL - \$700 *Donation includes:* \$ _____

- 2 Gala tickets
- Logo in Event Program
- Logo in digital signage

SUPPORTER LEVEL - \$300 *Donation includes:* \$ _____

- 1 Gala ticket
- Logo in program booklet

SPECIAL ADD-ONS:

- | | |
|--|------------------------|
| • Whole Page AD | \$300..... \$ _____ |
| • Half Page AD (5.5 w x 4.25h) | \$200 \$ _____ |
| • Special Themed Raffle Basket ¹ | \$300.....\$ _____ |
| • Additional Gala Event Tickets | \$200 per.....\$ _____ |
| • 1-line message in Event Program ² | \$75.....\$ _____ |

TOTAL: \$ _____

Treatment Center Name: _____

Mailing Address: _____

Contact Name: _____ **Phone:** _____

Email: _____

Tax ID: 47-5334145
501 (c) (3) tax-exempt,
public charity.

¹ You pick from a list of themes, we build it, advertise your business and give you the credit!
² e.g. memorial message/ show of support for our work/congrats to one of our hometown hero’s

Pay via call, mail, email OR paypal: The Peggie and Paul Shevlin Family Foundation
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