

We are looking forward to your support of Partners for Healing and hope that you will help us continue on our mission this coming cycle. Many of our goals this last year were only realized because of the communities' generosity. As your donation provides essential dollars to support our work throughout the year, we believe your sponsorship should be recognized the entire year. Our goal is to provide our loyal partners with special perks over the next 12 months to reflect the importance of supporters. This year's sponsorship will be effective September 15, 2022 through September 14, 2023. The enclosed chart shows the various perks associated with each annual sponsorship level. To celebrate our community partners we will be hosting a sponsors only Thank You event at the Jack Daniel's Visitor's Center on October 27th from 5:00pm – 7:00pm. More details will be sent closer to the event date.

The reason Partners exists is to help our neighbors in Coffee, Franklin and Moore Counties that are uninsured, get access to quality health care. A patient recently shared with us - "Partners for Healing has saved my life. Because I am uninsured, I was able to get my blood pressure medication, my cholesterol medication, and was able to get mammograms since I am high risk." Thank you for supporting Partners for Healing. The impact of your sponsorship makes such a difference in our communities.

We are always open to discussing other ways you can support us with things like in kind support. These could include providing medical or dental services to our patients at free or reduced costs, food or hygiene items for patients. Please contact me to discuss these ideas at Director@partnersforhealing.org or 931-455-5014.

Sincerely,

Lynn Brumfield, Executive Director

The power of your gift 2021-2022



Our Community Health Worker has assisted 176 Partner's patients with non-medical needs such as food, clothing, and transportation. She also participated in 9 community relations events and interacted with almost 300 potential patients in the tri-county area.

Thank you for your support!

I wish to sponsor Partners for Healing for the 2022-2023 year at the level checked below:

- Emerald \$10,000+
- Platinum \$5,000
- Gold \$2,500
- Silver \$1000
- Bronze \$500

Name of Company _____

Address _____

Email _____

Primary Point of contact _____

Signature _____ Date _____

Please make check payable to: Partners for Healing

Return this form to Partners for Healing in the envelope provided.
Full payment is due by September 15, 2022 or an agreement on a payment plan.
Please mail check and commitment letter to
Partners for Healing 109 W Blackwell Street Tullahoma, TN 37388.



Partners for Healing is a 501(c)(3) nonprofit organization.
Your contribution may be tax-deductible to the extent allowed by law.



Sponsor Perks

We are grateful for your contributions as every dollar is crucial to the continuation of our work at Partners. We are pleased to be able to offer the following perks to our generous sponsors:

| | Sponsor Level | | | | |
|--|---------------|------|--------|------|-------|
| | \$10K | \$5K | \$2.5K | \$1K | \$500 |
| Placement on Wall of Support | | | | | |
| Large | x | | | | |
| Small | | x | | | |
| Marketing Materials | | | | | |
| Presenting sponsor status on select materials (Name/Logo) | x | | | | |
| Name/Logo recognition on select materials | | x | x | | |
| Name recognition on select materials | | | | x | x |
| Partners Web Site | | | | | |
| Name/Logo recognition and link back to your site/ 2 feature articles | x | | | | |
| Name/Logo recognition / 1 feature article | | x | | | |
| Name/Logo recognition / 1 feature photo | | | x | | |
| Name recognition | | | | x | x |
| Partners Social Media | | | | | |
| Quarterly Shout-out with company photo and logo | x | | | | |
| Quarterly Shout-out with company logo | | x | x | | |
| Quarterly Shout-out with company name | | | | x | |
| Community Papers | | | | | |
| Article in local news | x | x | | | |
| Event Participation | | | | | |
| Opportunity for Information Booth at event | x | | | | |
| Opportunity to provide information/materials to attendees | | x | x | | |
| Payment Options | | | | | |
| Quarterly payment plan available | x | x | | | |
| Event Attendance | | | | | |
| Complimentary Passes | x | x | x | x | x |