



The Dementia Expense And Nursing Assistance Foundation

## Sponsorship Form

Please select your sponsorship level:

Bronze Level \$200

Silver Level \$500

\*two tickets to the Gala

Gold Level \$1000

\*four tickets to the Gala

Platinum Level \$2000

\*one table for eight to the Gala

Make Checks Payable to:

The DEANA Foundation

Mail Check and this form to:

**The DEANA Foundation  
7535 Jurupa Ave, Unit F  
Riverside, CA 92504**

Sponsor \_\_\_\_\_

Main Contact \_\_\_\_\_

Address \_\_\_\_\_

Email \_\_\_\_\_ Phone # \_\_\_\_\_

Amount \$ \_\_\_\_\_ Check # \_\_\_\_\_

Note: Per IRS publication 526, if you receive a benefit as a result of making a contribution to a qualified organization, you can deduct only the amount of your contribution that exceeds the value of the benefit you received. You have the option to waive the benefits, in order to take the full amount as a deduction. The benefit value and net deduction amount will be listed on your tax receipt.

I would like to waive any associated sponsorship benefits – Initials \_\_\_\_\_