PERSONALIZED MESSAGE

8" x 8" Name Plaque: (70pt font, 13 characters per line, 6 lines max; option for custom logo) *The size of the logo will limit the number of characters. Please submit the artwork as an EPS or vector to nancygomez@nevhc.org for approval.*

1.							
2.							
3.							
4.							
5.							
6.							

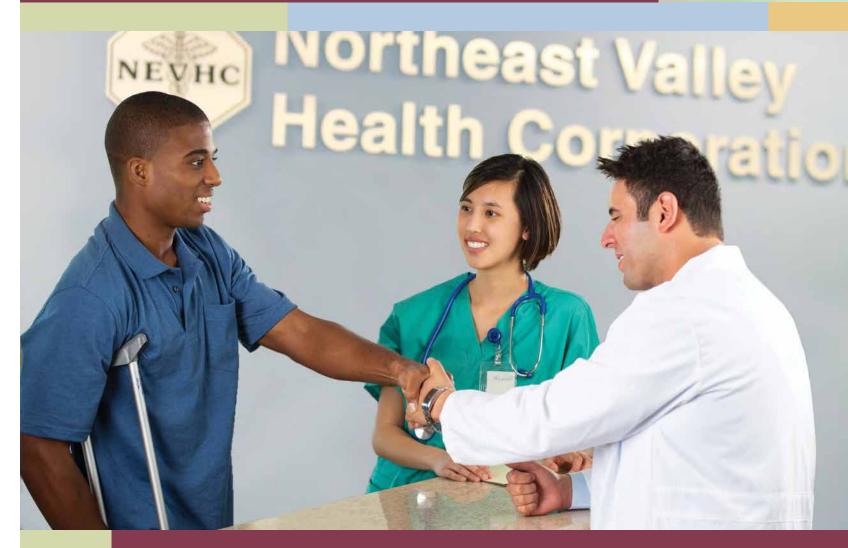
6" x 6" Name Plaque: (52pt font, 12 characters per line, 6 lines max)

1.						
2.						
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6.						

4" x 4" Name Plaque: (36pt font, 11 characters per line, 6 lines max)

1.						
2.						
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5.						
6.						





PILLAR Of Our

at the Van Nuys Adult Health Center

Corporate Office | 1172 N. Maclay Avenue | San Fernando, CA 91340 | www.nevhc.org Van Nuys Adult Health Center | 14624 Sherman Way, 6th Floor | Van Nuys, CA 91405

PILLAR of Support at the Van Nuys Adult Health Center

To meet the growing demand for healthcare services, the Van Nuys Adult Health Center (VNAHC) has relocated to a new state-of-the-art facility that features exam rooms for both adult primary care and specialty care for HIV and Hepatitis C patients. The new 9,000-square-foot site has 10 exam rooms and is projected to provide over 19,000 patient visits annually.

As a valued partner and friend of Northeast Valley Health Corporation (NEVHC), you are invited to support the new VNAHC by personalizing a Name Plaque on our *Pillar of Support* Donor Wall.

NEVHC has several Name Plaque options that provide a way for you to leave a commemorative tribute or memorial gift in honor of your business or organization, a loved one, a fellow colleague or a special friend. NEVHC would be honored to have your name engraved on the *Pillar of Support* Donor Wall.

Your contribution will help us provide specialty care for HIV and Hepatitis C patients as well as adult primary care services.

With 15 licensed health centers, NEVHC is one of the nation's largest community health centers providing nearly 300,000 patient visits annually. Our mission is to provide quality, safe and comprehensive primary health care to medically underserved residents of Los Angeles County, particularly in the San Fernando and Santa Clarita valleys, in a manner that is sensitive to the economic, cultural and linguistic needs of the community.







Rendition of the *Pillar of Support* Donor Wall at the VNAHC. Names on the plaques are actual supporters at the time of printing. Additional name plaques will be added.

PILLAR of Support REPLY FORM

NAME PLAQUE PRICES: (70pt font, 13 characters per line, 6 lines max; option for custom logo) □ 6" × 6" Name Plaque:......\$375 (52pt font, 12 characters per line, 6 lines max) □ 4" × 4" Name Plaque: \$175 (36pt font, 11 characters per line, 6 lines max) Include your personalized message on the back side of this reply form. NAME AND ADDRESS Organization: Email: __

PAYMENT METHOD

□ Check: Enclosed is my check for \$ _____ payable to: Northeast Valley Health Corporation

Please send your check and reply form to NEVHC:

Attn: Development Department 1172 N. Maclay Avenue San Fernando, CA 91340

□ □ Credit Card (circle one):

American Express | Discover | MasterCard | Visa

Name on Card:

Credit Card #:

Expiration Date:

Zip Code: _____ CCV#: _____

To purchase your Name Plaque online, please visit **www.nevhc.org/vnahc.**

The *Pillar of Support* Donor Wall will be engraved twice a year. As a token of our appreciation, you will receive a commemorative photo of your Name Plaque once it is engraved.



Please complete and return this form with your check or payment information to:

NEVHC | 1172 N. Maclay Avenue, San Fernando, CA 91340 | Attn: Development Department

You may also email this form to nancygomez@nevhc.org. If you have any guestions, please contact Nancy Gomez at (818) 270-9578.







