



Children's Health Fund

ChildrensHealthFund.org

2009 Award Recipients

Humanitarian Award
Secretary of State
Hillary Rodham Clinton

Corporate Award
Steve Hemsley
President and CEO
UnitedHealth Group

Founders' Award
Skip Keesal
Partner
Keesal, Young & Logan

Entertainment

Willie Nelson, along with **Paul Simon**

Benefit Chairs

Bernard Poussot
Chairman, President and CEO
Wyeth

David Pulman, Ph.D.
President, Global Manufacturing and Supply
GlaxoSmithKline

Tim Rothwell
Chairman
sanofi-aventis U.S.

Evening Hosts

Paul Simon
Co-Founder
Children's Health Fund

Irwin Redlener, M.D.
Co-Founder and President
Children's Health Fund

Karen Redlener
Executive Director
Children's Health Fund

Children's Health Fund's Annual Benefit

Wednesday, May 27, 2009

Sheraton New York Hotel and Towers

Reception 6:30 pm / Dinner and Program 7:30 pm

Business Attire

Reservation Form

I wish to make the following reservation:

I will become an **Underwriter** with a gift of **\$100,000**.
(Includes "Benefit Co-Chair" title and prominent listing on all printed materials, 6 tickets to the Honorees' Reception, seating at head table, two Underwriter tables seating ten, Platinum Page in souvenir journal, and special recognition from podium)

I will become a **Benefactor** with a gift of **\$50,000**.
(Includes "Dinner Co-Chair" listing, 4 tickets to the Honorees' Reception, Benefactor table for ten, Gold Page in souvenir journal, and recognition from podium)

I will become a **Patron** with a gift of **\$25,000**.
(Includes "Dinner Co-Chair" listing, 2 tickets to the Honorees' Reception, Premium table for ten, and Patron Page in souvenir journal)

I will become a **Sponsor** with a gift of **\$15,000**.
(Includes Prime table for ten, and full-page ad in souvenir journal)

I will become a **Friend** with a gift of **\$10,000**. ***limited availability***
(Includes Select table for ten, and half-page ad in souvenir journal)

or

Please reserve _____ tickets @ **\$1,000** each.

I cannot attend, but would be pleased to contribute \$_____.

Name _____

Title _____

Firm _____

Address _____

City/State/Zip _____

Phone _____ E-mail _____

Please invoice me for \$_____.

Please charge my: Amex Mastercard Visa for \$_____.

Card No _____ Exp. Date _____

Signature _____

Sorry, I am unable to support the Benefit Dinner this year.

Return this form to Laurie H. Thompson by fax at **212.997.0188** or mail to:

Children's Health Fund, Annual Benefit Headquarters

145 West 45th Street, Suite 300, New York, NY 10036

Phone: 212.997.0100 x234, Email: lthompson@projectsplusinc.com

The non-deductible portion of each ticket is \$175. Contributions are fully tax-deductible to the extent allowed by law. You may obtain a copy of our annual report by writing to NYS Office of the Attorney General, Charities Bureau, 120 Broadway, New York, NY 10271. Projects Plus, Inc. under the direction of Penny Stoil has been retained by CHF to manage the 12th Annual Benefit Dinner.