



# GLOBAL CLEVELAND



## 2020 ANNUAL MEETING



**Presented by:** MEDICAL MUTUAL

Join Global Cleveland to hear about our good work in our community and help us honor our community leaders positively impacting our region's economic prosperity.

..... *Join us* .....

**THURSDAY**  
**DECEMBER 10, 2020**  
**8:00 - 9:00 AM**

..... *on Zoom* .....

**India Pierce Lee**, Senior Vice President, Program, The Cleveland Foundation  
Albert B. & Audrey G. Ratner Community Leader Award

**Felton Thomas, Jr.**, Director, Cleveland Public Library  
Global Community Building Award

**Elizabeth McIntyre**, Executive Editor, Crain's Cleveland Business  
Media Partner Award

**Volunteer Translators**, who helped in the onset of Covid  
Volunteer of the Year Award

**St. Edward High School**  
Youth Leader Award



**WE STRENGTHEN OUR CITY -  
BY WELCOMING OUR WORLD.**

### → CONTACT

For more information, please contact Michelle A. Carver at  
**MICHELLE@GLOBALCLEVELAND.ORG** or **216.487.1833**



# 2020 ANNUAL MEETING SPONSORSHIP FORM

## *SPONSORSHIP OPPORTUNITIES*

### GLOBAL \$10,000 - MEDICAL MUTUAL

- Presenting Sponsor
- Corporate logo included on digital Save-the-Date and Invitation
- Corporate name included in advance publicity
- Corporate logo on Annual Meeting digital background
- Inclusion in social media promotions
- Corporate logo on digital communication and website
- Recognition during event



### NATIONAL \$5,000

- Corporate name included in advance publicity
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### STATE \$2,500

- Corporate logo on Annual Meeting digital background
- Inclusion in social media promotions
- Corporate logo on digital communication and website
- Recognition during event

### LOCAL \$1,000

- Inclusion in social media promotions
- Corporate logo on digital communication and website
- Recognition during event

**YES, WE WOULD LIKE TO SUPPORT GLOBAL CLEVELAND IN THE AMOUNT OF \$ \_\_\_\_\_**

COMPANY NAME \_\_\_\_\_

CONTACT NAME \_\_\_\_\_

ADDRESS \_\_\_\_\_ CITY/STATE/ZIP \_\_\_\_\_

EMAIL ADDRESS \_\_\_\_\_

PHONE NUMBER \_\_\_\_\_

CREDIT CARD # \_\_\_\_\_

EXP. DATE \_\_\_\_\_ CVC \_\_\_\_\_

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