



CalCPA 47th Annual Golf Tournament

“Sponsors Needed”

An event we all look forward to is the Chapter’s annual golf tournament. This year we will hold it on **Thursday, August 26, 2010 at Morgan Creek Golf & Country Club**, with an 11:00 a.m. shotgun start. As this tournament is the primary source of funds for the annual scholarships presented by the Chapter, **sponsors are needed!** Your firm/company will receive recognition during the tournament, during the dinner, be listed in the tournament program, and be acknowledged in our *Chapter Bulletin*.

Make Checks Payable to: CalCPA – Sacramento Chapter
Mail to: Dana Agosti
CalCPA; 1201 K Street, Suite 1000, Sacramento, CA 95814
Phone: (916) 551-2961 Fax: (916) 441-5354

_____ \$3,000 **Course Sponsor**
Golf for 8 Players,
Includes Lunch & Dinner
Acknowledgement in Chapter Bulletin
Name Recognition on all
Tournament Materials

_____ \$1,500 **Eagle Sponsor**
Golf for 4 Players
Includes Lunch & Dinner
Name Recognition on all
Tournament Materials

_____ \$750 **Par Sponsor**
Golf for 2 players
Includes Lunch & Dinner
Name Recognition on all
Tournament Materials

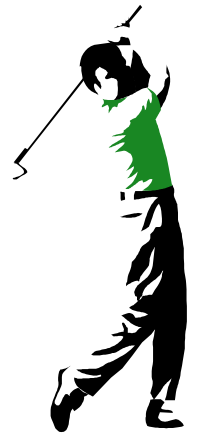
_____ \$400 **Hole Sponsor**
Golf for 1 Player,
Includes Lunch & Dinner
Name Recognition on all
Tournament Materials

_____ \$200 **Putting Contest Sponsor**
Name Recognition

_____ \$200 **Picture Sponsor**
Name Recognition

_____ \$200 **Beverage Sponsor**
Name Recognition

_____ **Raffle Prize**
Indicate item & value



ALL PROCEEDS BENEFIT THE SACRAMENTO CHAPTER SCHOLARSHIP PROGRAM
Tax ID for CalCPA is 94-1056137

Name: _____ Phone: _____

Firm/Company: _____ FAX: _____

Address: _____ City, State, Zip: _____

E-Mail Address: _____

Player 2 _____ Firm: _____

Player 3 _____ Firm: _____

Player 4 _____ Firm: _____

Check (Payable to CALCPA-Sacramento)

Mastercard Visa AMEX Card # _____ Exp. Date: _____

Cardholder Name: _____

Total Amount: _____ CalCPA ID # of Card Holder _____

E-mail & Phone (if different from above) _____