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www.acmhs.org | 510.451.6729

Asian Community Mental Health Services (ACMHS) is an effective and independent voice for underserved APIs and their families because of the generous support of our donors. Every year, we help more than 3,000 low-income, refugee, and marginalized API community members, but thousands more need our services.

Asian Community Mental Health Services 37th Anniversary Gala

Innovation & Collaboration: Building a Resilient Community

INNOVATION COLLABORATION

You are cordially invited to celebrate our 37th Anniversary Gala

AMBASSADOR

Kazan, McClain, Abrams,
Fernandez, Lyons,
Greenwood, Harley &
Oberman Foundation, Inc.

CHAMPION

Asian Health Services
Telecare Corporation

COMMUNITY

Alta Bates Summit
Medical Center
Center for Elders'
Independence
Family Bridges, Inc.
Kaiser Permanente
Susan & Ken Kawaichi
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SUPPORTER

Leroy M. Morishita &
Barbara Hedani-Morishita

SPECIAL THANKS

The Claremont Hotel
Club & Spa

HONORARY CHAIR

Mayor Jean Quan

EVENING EMCEE

Alan Wang, Anchor, ABC 7

Entertainment by Pulse

HONORING

Alameda County Provider Network for Tobacco
Dependence Treatment and Cessation

Jennie VC. Wong, Child Development Specialist

Friday, October 21, 2011

The Claremont Hotel Club & Spa
41 Tunnel Road, Berkeley, CA 94705

6-7 pm Reception/Silent Auction

7-9 pm Dinner/Program

Post Program Entertainment &
Dancing til' 10 pm

*Early arrival is suggested for self-parking.
Valet parking is also available.*

To purchase tickets online, please go to www.acmhs.org

For more information:

*415.821.9693 | melinda@cbcsanfrancisco.com
www.acmhs.org*

Asian Community Mental Health Services 37th Anniversary Gala

Innovation & Collaboration: Building a Resilient Community

Friday, October 21, 2011 The Claremont Hotel Club & Spa

**Please reply by
Friday, October 7th, 2011**

Yes! I would like to support the 37th Anniversary Gala

*To purchase tickets online,
please go to www.acmhs.org*

\$5,000 AMBASSADOR, Ten tickets

\$3,000 CHAMPION, Ten Tickets

\$500 SUPPORTER, Two Tickets

\$1,500 COMMUNITY, Four Tickets

_____ Seats at **\$150** ea.

Yes. I/We will attend! A contribution in the amount of \$_____ is enclosed.

No. I/We cannot attend, but enclosed is a tax-deductible contribution of \$_____.

PAYMENT METHOD Check enclosed Visa MasterCard

Signature _____

Cardholder Name _____

Credit Card # _____ Exp. Date _____

Billing Address _____

City _____ State _____ Zip _____

Phone _____ E-mail _____

Name/Organization _____

Address _____

Phone _____ Fax _____

E-mail _____

Guest Name(s)/Meal Preferences *Please circle one entrée per guest.* **C** Chicken **S** Salmon **V** Vegetarian

1 _____ **C S V** 6 _____ **C S V**

2 _____ **C S V** 7 _____ **C S V**

3 _____ **C S V** 8 _____ **C S V**

4 _____ **C S V** 9 _____ **C S V**

5 _____ **C S V** 10 _____ **C S V**

Please return this form in the provided envelope or fax to 415.821.9655.

For more information visit us at www.acmhs.org, call 415.821.9693 or email Melinda@cbsanfrancisco.com.

RSVP by Friday, October 7th, 2011. Tickets will be held at the door.

The fair market value of each ticket is \$60. All contributions exceeding this value are tax deductible.

A receipt will be mailed to the address you have provided. All sales are final. IRS # 94-2248390