



Missouri Valley Chapter of PDA Event Sponsorship

This is the first event for 2014 of PDA's MO Valley Chapter. There are two annual events per year. We are pleased to offer the following Sponsorship Opportunities:

MO Valley Chapter Annual Sponsor: \$1,500

Includes table booth at both events, name/logo on website, special recognition at both annual events, admission for 2 company representatives and/or guests at both events.

-- Unlimited availability

Social Hour Sponsor this Event (1 available): \$500.

Dinner Sponsor this Event (2 available): \$500.

Marketing Table Booth at this Event (10 available): \$500.

Sponsor a Dinner Table (Includes Name on Table & 8 registrations): \$350.

Monday, April 21, 2014

Topic: Quality Metrics

Program:

- 5:00pm – Cocktail/Social
- 6:15pm – Introduction of Sponsors & Vendors
- 6:30pm – Dinner
- 7:00pm – Speakers:
 - **Mr. Gerald Bromley – FDA Remarks**
FDA – Kansas City District Office
 - **Ms. Denyse Baker – PDA Comments process for Quality Metrics**
PDA – Senior Advisor, Scientific and Regulatory Affairs
former FDA, PE, RAC
 - **Ms. Susan Schniepp – Quality Metrics – Points to Consider**
VP, Quality and Regulatory Affairs, Allergy Laboratories, Inc.
and facilitator for PDA's recent Quality Metrics Conference

This meeting is being held at the Hilton Hotel at MCI Airport in Kansas City, MO (Kansas City area).

Please contact Valerie Welter (816) 676-6178 or valerie.welter@bayer.com to Sponsor now or fill out below:

PDA Membership # _____
 Name _____
 Company _____
 Address _____
 City/State/Zip _____
 Phone & Fax _____
 Email _____

	Price	Quantity	Total
Members	\$55	x _____ =	\$ _____
Nonmembers	\$65	x _____ =	\$ _____
Social Hour Sponsor	\$500	x _____ =	\$ _____
Dinner Sponsor	\$500	x _____ =	\$ _____
Marketing Table Booth	\$500	x _____ =	\$ _____
Dinner Table	\$350	x _____ =	\$ _____
Annual Sponsor	\$1,500	x _____ =	\$ _____

Total Amount: \$ _____

Payment Method:

Check enclosed – payable to MO Valley Chapter of PDA

Bill my Credit Card: Circle Type: VISA MC AMEX

Name _____
 Card# _____
 Expiration Date _____
 Signature _____