



## OREGON PSYCHIATRIC PHYSICIANS ASSOCIATION

Dear Exhibitor:

We invite you to participate in the 2019 Oregon Psychiatric Physicians Association 46<sup>th</sup> Annual Winter Conference to be held at the Multnomah Athletic Club in Portland March 1-2. Exhibit times are Friday-Saturday 7 a.m. to 5 p.m. Please refer to our exhibitor packet, which lists opportunities for support of the meeting.

By exhibiting you will find time for direct interaction and optimizing the value of your support. Our exhibit hall provides a relaxed setting for direct communication with attendees, allowing you to strengthen relationships while providing important professional information and updates. In accordance with the Accreditation Council for Continuing Medical Education guidelines, exhibit tables are in an area that is separate from the room where the educational sessions will take place. This invitation to exhibit is being extended to your company, as well as others in the industry.

The exhibit room will be arranged to organize these interactions through careful placement of displays and meal/refreshment stations. Our attendees include psychiatrists, psychiatric mental health nurse practitioners, psychologists, social workers, counselors, therapists, and other mental health practitioners.

Benefits to exhibiting at our conference include:

- Access to showcase your products/services to approximately 150-200 psychiatrists and mental healthcare providers from Oregon, Southwest Washington, Northern California, and other surrounding states.
- Company recognition in meeting program
- Prominent company signage at events
- Direct interaction time in exhibit hall during breakfast/registration, breaks, and lunch.
- Attendee list provided at the meeting
- Additional opportunities for prominent recognition and introductions

We look forward to hearing from you in the very near future. Space is limited, please reserve early! A completed registration form and payment will reserve your exhibit space. We look forward to seeing you in Portland in March!

Please register online at [www.oregonpsychiatric.org](http://www.oregonpsychiatric.org)

Sincerely,  
Clara Ruiz, MD  
President

**Oregon Psychiatric Physicians Association**  
Tax ID: 93-0674174

PO Box 21571, Keizer OR 97307 | (503) 406-2526 | [info@oregonpsychiatric.org](mailto:info@oregonpsychiatric.org) | [www.oregonpsychiatric.org](http://www.oregonpsychiatric.org)

## Sponsorship/Exhibitor Opportunities

The Oregon Psychiatric Physicians Association annual winter conference in Portland draws approximately 150-200 psychiatric physicians and allied health professionals over two days for an educational program featuring the latest in mental health education. Attendees come from Oregon and the Pacific Northwest. We look forward to your support as a sponsor/exhibitor and hope to make your experience worthwhile.

Base Exhibitor Fee of \$1,750 includes:

- 6-foot table and two chairs for exhibit staff Friday & Saturday
- Mobile App access to collect attendee information and interact with attendees
- Acknowledgement by conference committee members during introduction and breaks
- Participation in exhibitor passport, which encourages attendees to visit exhibitor booths for a chance to win prizes
- Continental breakfast, refreshments, and lunch included for two exhibit staff Friday & Saturday
- Networking Opportunities during Friday breakfast (one hour), Friday morning break (15 minutes), Friday afternoon break (15 minutes), Saturday breakfast (one hour), Saturday lunch (1.5 hours), Saturday afternoon break (15 minutes)

Additional Investment Opportunities:

- Mobile App:
  - Logo Displayed in Mobile App for all attendees = \$250.00
  - Upload 1 Document to Mobile App for attendees to access = \$250.00
  - Send 2 Push Announcements/Emails to attendees before/during/after conference through mobile app = \$250.00
  - Send 1 push announcement/email to attendees before/during/after conference through mobile app = \$150.00
- Attendee Packet:
  - Printed Program Full Page Ad = \$300.00
  - Printed Program Half Page Ad = \$150.00
  - Separate Flyer to be included in Packet = \$500.00
- Booth Placement:
  - Priority Booth Placement/Selection = \$500.00
- Additional Staff:
  - Additional Staff (beyond 2) participating in meals/breaks = \$100.00

REGISTER ONLINE AT [www.oregonpsychiatric.org](http://www.oregonpsychiatric.org)

# Request for Taxpayer Identification Number and Certification

**Give Form to the  
 requester. Do not  
 send to the IRS.**

▶ Go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9) for instructions and the latest information.

Print or type. See Specific Instructions on page 3.	<p><b>1</b> Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.                  Oregon Psychiatric Physicians Association</p> <p><b>2</b> Business name/disregarded entity name, if different from above</p>	
	<p><b>3</b> Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only <b>one</b> of the following seven boxes.</p> <p> <input type="checkbox"/> Individual/sole proprietor or single-member LLC                         <input type="checkbox"/> C Corporation                         <input type="checkbox"/> S Corporation                         <input type="checkbox"/> Partnership                         <input type="checkbox"/> Trust/estate  <input type="checkbox"/> Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____  <b>Note:</b> Check the appropriate box in the line above for the tax classification of the single-member owner. Do not check LLC if the LLC is classified as a single-member LLC that is disregarded from the owner unless the owner of the LLC is another LLC that is <b>not</b> disregarded from the owner for U.S. federal tax purposes. Otherwise, a single-member LLC that is disregarded from the owner should check the appropriate box for the tax classification of its owner.  <input checked="" type="checkbox"/> Other (see instructions) ▶ <span style="margin-left: 100px;">non-profit corporation</span> </p>	<p><b>4</b> Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):</p> <p>Exempt payee code (if any) _____</p> <p>Exemption from FATCA reporting code (if any) _____</p> <p style="font-size: small;">(Applies to accounts maintained outside the U.S.)</p>
	<p><b>5</b> Address (number, street, and apt. or suite no.) See instructions.                  PO Box 21571</p> <p><b>6</b> City, state, and ZIP code                  Keizer, OR 97307</p> <p><b>7</b> List account number(s) here (optional)</p>	<p>Requester's name and address (optional)</p>

## Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

**Note:** If the account is in more than one name, see the instructions for line 1. Also see *What Name and Number To Give the Requester* for guidelines on whose number to enter.

<b>Social security number</b>									
				-			-		
<b>or</b>									
<b>Employer identification number</b>									
9	3	-	0	6	7	4	1	7	4

## Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Certification instructions.** You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

<b>Sign Here</b>	Signature of U.S. person ▶	Date ▶ 01/01/2018
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## General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

**Future developments.** For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to [www.irs.gov/FormW9](http://www.irs.gov/FormW9).

## Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS must obtain your correct taxpayer identification number (TIN) which may be your social security number (SSN), individual taxpayer identification number (ITIN), adoption taxpayer identification number (ATIN), or employer identification number (EIN), to report on an information return the amount paid to you, or other amount reportable on an information return. Examples of information returns include, but are not limited to, the following.

- Form 1099-INT (interest earned or paid)

- Form 1099-DIV (dividends, including those from stocks or mutual funds)
- Form 1099-MISC (various types of income, prizes, awards, or gross proceeds)
- Form 1099-B (stock or mutual fund sales and certain other transactions by brokers)
- Form 1099-S (proceeds from real estate transactions)
- Form 1099-K (merchant card and third party network transactions)
- Form 1098 (home mortgage interest), 1098-E (student loan interest), 1098-T (tuition)
- Form 1099-C (canceled debt)
- Form 1099-A (acquisition or abandonment of secured property)

Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN.

*If you do not return Form W-9 to the requester with a TIN, you might be subject to backup withholding. See What is backup withholding, later.*