



Chinese American Hematologist and Oncologist Network
美国华裔血液与肿瘤专家学会

Dear Colleague,

We would like to invite your organization to consider supporting **CAHON's 2024 Community Oncology Forum (COF)** as a sponsor or exhibitor. The COF will take place on Saturday, March 30, 2024 from 7:00am – 3:00pm ET at The Omni Orlando Resort at ChampionsGate in Orlando, Florida.

The target audiences are clinicians, clinical fellows, and health care related specialists working the related areas. Approximately 80 providers are expected to participate in this year's COF along with about 60 practicing oncologists. Attached please find the preliminary program and a sponsorship package for your consideration.

Sponsors will have the opportunity to be recognized in promotional materials such as the printed program, event signage, rotating slides, and on the CAHON event website. Additionally, sponsoring companies will receive a complimentary display table and complimentary registration(s). An exhibition area will be set up away from the symposium area for pharmaceutical companies, technology companies, and commercial laboratories to showcase their products and services.

The purpose of this event is to:

- Offer expert perspectives and practical insights into the use of immunotherapy and targeted treatments in cancer care with focuses on various lymphomas, myeloma, lung cancer, and rectal cancer.
- Foster collaboration and provide a forum for interaction and collaboration between practicing hematologist and oncologists working in the field.

CAHON is a 501(c)(3) not-for-profit organization (Tax ID: 20-3662275) founded by Chinese American Hematologists and Oncologists in 2005. One of the primary missions of CAHON is to foster communications amongst Chinese American medical professionals for the delivery of high-quality health care to patients with neoplastic and hematological diseases.

Thank you for your consideration.

Best Regards,

Bo Zhao, MD – *Virginia Oncology Associates*
Mary Li, MD, PhD – *Florida Cancer Specialists*
Yi Feng, MD, PhD – *Tennessee Cancer Specialists*
Shuang Fu, MD, PhD – *Jackson Hematology & Oncology Associates*
Bo Wang, MD- *Willamette Valley Cancer Institute AND Research Center*
Joyce Huang, MD, PhD – *Cancer Care Associates of York*
Lulu Zhang, MD, MPH – *Pacific Cancer Care*
Wenqing Zhang, MD, PhD – *Florida Cancer Specialists*
David Z. Chang, MD, PhD – *Virginia Oncology Associates*



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11:30 – 12:00 am

Round Table Discussion: Rectal Cancer

Moderator: **David Chang, MD, PhD** - Virginia Oncology Associates

Presenter: **Ping Gu, MD, PhD** - Memorial Sloan Kettering Cancer Center

Panelists: , **MD** -

, **MD** -

, **MD** -

, **MD** -

12:00 – 1:00 pm

Promotional Talk: Explore the Current Data That Could Help You Recognize/Assess Candidates for a CDK4 & 6 Inhibitor – sponsored by Eli Lilly & Co

Speaker TBD

1:00 – 1:15 pm

Break & Visit the Exhibitors

1:15 – 2:00 pm

Lecture 6: Clinic Workflow

Moderator: Yi Feng, MD, PhD – Tennessee Cancer Specialists

Panelists: , **MD** -

, **MD** -

, **MD** -

, **MD** -

2:00 – 2:45 pm

Lecture 7: Physician Financial Planning

Speaker: David Z. Chang, MD, PhD – Virginia Oncology Associates

Panelists: , **MD** -

, **MD** -

, **MD** -

, **MD** -

2:45 – 2:50 pm

Concluding Remarks

TBD

3:00 – 4:00 pm

Social Networking



Chinese American Hematologist and Oncologist Network 美国华裔血液与肿瘤专家学会

Meeting Organizers

Bo Zhao, MD – *Virginia Oncology Associates*

Mary Li, MD, PhD – *Florida Cancer Specialists*

Yi Feng, MD, PhD – *Tennessee Cancer Specialists*

Shuang Fu, MD, PhD – *Jackson Hematology & Oncology Associates*

Bo Wang, MD – *Willamette Valley Cancer Institute AND Research Center*

Joyce Huang, MD, PhD – *Cancer Care Associates of York*

Lulu Zhang, MD, MPH – *Pacific Cancer Care*

Wenqing Zhang, MD, PhD – *Florida Cancer Specialists*

David Z. Chang, MD, PhD – *Virginia Oncology Associates*

About CAHON

Founded by Chinese American Hematologists and Oncologists in 2005, CAHON is dedicated to fostering communications among Chinese American medical professionals for the delivery of high-quality health care to patients with neoplastic and hematological diseases, and to promoting the exchange of medical information between the United States and China in the fields of hematology and oncology. CAHON strives to serve as a bridge of medical and educational exchange for its members and between Chinese and American Hematology-Oncology.



CAHON 2024 COF
Sponsorship & Exhibit Opportunities

Saturday, March 30th, 2024 - 7:00 am – 3:00 pm
 Omni Orlando Resort at ChampionsGate, Orlando, FL 33896

Sponsorship Packages	Diamond \$30,000	Platinum \$25,000	Gold \$20,000	Silver \$15,000	Bronze \$10,000
Recognition as an Industry Supporter on the CAHON website	12 months	9 months	6 months	3 months	1 month
Recognition in event promotional materials: event web page, printed program, rotating slides and event signage	Most Prominent Logo & Description	Prominent Logo & Description	Large-Sized Logo & Description	Medium-Sized Logo & Description	Small-Sized Logo & Description
Complimentary Registrations	5	4	3	2	1
Company Introduction during Event Break (2 minutes)	•	•	N/A	N/A	N/A
Logo Included in Event Communications	•	•	•	•	•
Complimentary Display Table, incl. 2 staff	•	•	•	•	•
Advertisement in Event Program	Full Page	Full Page	Half Page	Half Page	Fourth Page

Exhibit Display Table, \$3,000

- 6’ skirted table top exhibit, 2 chairs
- 2 complimentary event registrations. Additional event registrations can be purchased
- Exhibitor logo included in enhanced exhibitor listing in the event program
- Exhibitor name included on event website

CAHON Contact Information

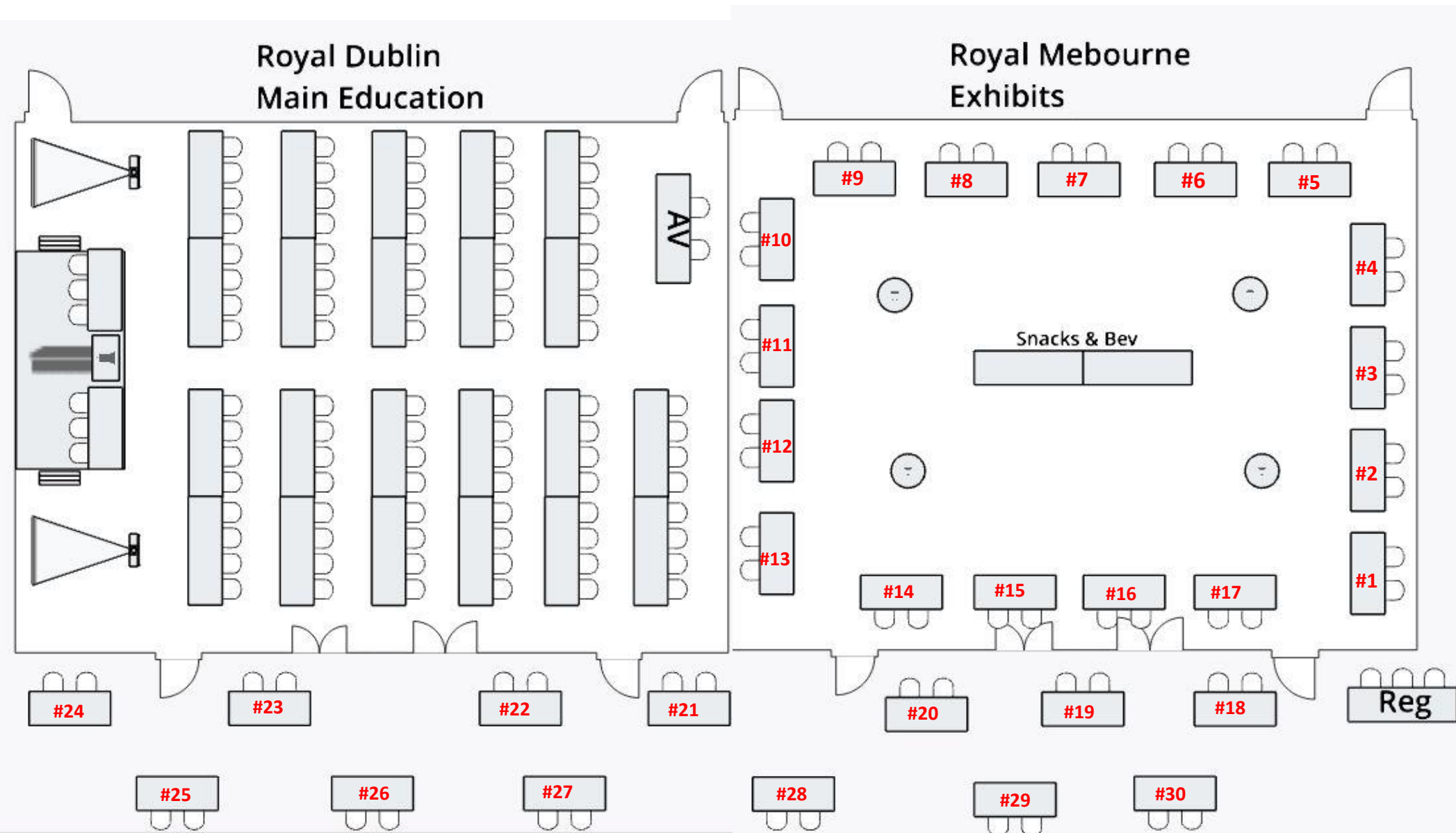
For all sponsorship and exhibit questions, contracts, and payment, please contact:

CAHON Development Manager

Eli Gonzalez-Rehorst, MS
 Phone: (414) 231-8241
Egonzalez-rehorst@cahon.org

CAHON 2024 Community Oncology Forum (COF)

Saturday, March 30, 2024



Breakfast and Lunch Promotional
Talks Down the Hall in St. Andrew's



Sponsor and Exhibitor Agreement

Exhibitor Staff

Please send exhibit staff information to Eli Gonzalez-Rehorst at egonzalez-rehorst@cahon.org by March 1, 2024. Exhibit staff information includes full name, designations, email address, and dietary restrictions.

Exhibit Assignments

Exhibit placement will be assigned on a first-come, first-serve basis based on the date and time that the application is received. CAHON reserves the right to adjust assigned exhibit placement at any time.

Cancellation Policy

Cancellations received in writing by March 1, 2024 will be refunded, minus a \$75.00 administrative fee. Cancellations after this date will not receive a refund unless the booth space is resold in the case of exhibitors. If for any cause beyond the control of CAHON – such as, but not limited to, an act of God, the public enemy, authority of the law, fire, public health emergencies, or other force majeure—CAHON is unable to comply with the terms of this contract, this contract shall be considered terminated and any payments made hereunder by the supporter shall be refunded to the supporter in full. The supporter also reserves the right to carryover their support to CAHON's 2025 Community Oncology Forum.

Exhibitor Agreement Terms and Conditions

You are hereby authorized to reserve space for the company indicated to exhibit at the Community Oncology Forum to be held March 30, 2024, at the Omni Orlando Resort at ChampionsGate in Orlando, Florida. We understand that the assigned space will be rented at the rate quoted in the Community Oncology Forum Opportunities guide. We understand further that all space must be paid for in full on or before March 1, 2024. If the assigned space is not paid for in full by the specified date, the space may be reassigned to another exhibitor at the discretion of the CAHON Executive Director. We agree to abide by all rules and regulations governing exhibitors set forth in the Community Oncology Forum Opportunities guide, which is made part of this contract by reference and fully incorporated herein.

Hold Harmless Clause: The exhibitor assumes the entire responsibility and liability for losses, damages and claims arising out of injury or damage to the exhibitor's displays, equipment and other property brought upon the premises of the exhibit facility and shall indemnify and hold harmless the Chinese American Hematologist and Oncologist Network, the Omni Orlando Resort at ChampionsGate, and each of their employees and agents from any and all such losses, damages and claims. In addition, the exhibitor acknowledges that it is the sole responsibility of the exhibitor to obtain business interruption and property damage insurance covering such losses by the exhibitor.

Exhibitor shall be fully responsible to pay for any and all damages to property owned by the Omni Orlando Resort at ChampionsGate, its owners or managers which result from any act or omission of Exhibitor. Exhibitor agrees to defend, indemnify and hold harmless, the Omni Orlando Resort at ChampionsGate, its owners, managers, officers or directors, agents, employees, subsidiaries and affiliates, from any damages or charges resulting from Exhibitor's use of the property. Exhibitor's liability shall include all losses, costs, damages, or expenses arising from, out of, or by reason of any accident or bodily injury or other occurrences to any person or persons, including the Exhibitor, its agents, employees, and business invitees which arise from or out of the Exhibitor's occupancy and use of the exhibition premises, the Omni Orlando Resort at ChampionsGate or any part thereof.

Promotional Activities: Advertisements and promotional materials may not be displayed or distributed in the educational space immediately before, during, or after a Continuing Education activity. No product advertisements will be permitted in the same room as the educational activity. Exhibitor staff may attend an educational activity, but may not engage in sales activities while in the room where the activity takes place.

Privacy Policy: CAHON does not makes names and contact information of attendees available to sponsors or exhibitors. We suggest you collect business cards or have a sign-up sheet available.



Sponsor and Exhibitor Agreement

Gratuities: CAHON prohibits the SOLICITATION OR ACCEPTANCE of tips in cash, product or gifts in kind by any employee (union or non-union). Our employees are paid appropriate wages denoting professional status, therefore tipping of any kind is not allowed.

Event Discrimination and Harassment

The Chinese American Hematologist and Oncologist Network (CAHON) is committed to providing a discrimination-, harassment-, and retaliation-free environment for all participants in society events. CAHON prohibits discrimination or harassment based on actual or perceived gender, gender identity, gender expression, sexual orientation, body size, disability, race, ethnicity, socioeconomic status, age, religion (or lack thereof), marital or parental status, or any other status protected by law (“protected status”). CAHON has zero tolerance for any form of harassment, discrimination, or retaliation at network meetings and events. This policy applies to all CAHON events, including those sponsored by other organizations held in conjunction with a CAHON event. All participants, including, but not limited to, attendees, speakers, volunteers, exhibitors, staff (including venue staff), contractors, vendors and other service providers, and anyone else present at CAHON meetings or events, are expected to abide by this policy.

Unacceptable Behavior

Discrimination consists of material, adverse treatment based on a person’s protected status. Conduct can amount to prohibited discrimination even when a person does not specifically intend to harm someone else.

Harassment consists of unwelcome conduct of a demeaning, abusive, and/or offensive nature that either (1) constitutes a term or condition of a person’s participation in society events (quid pro quo harassment); or (2) substantially interferes with a person’s participation in society events or otherwise creates what a reasonable person would consider to be a hostile environment. Examples of harassment include, but are not limited to, physical or verbal abuse of any participant, stalking or threatening any participant, harassing photography or recording of any participant, the use of slurs and epithets, display of disparaging material, display of sexual imagery, inappropriate or unwelcome physical contact, and nonconsensual sexual advances.

Retaliation consists of material, adverse action taken against someone because the person reported discrimination or harassment (either on behalf of themselves or another) or because the person participated in the investigation and resolution of a report. Retaliation can occur even if the underlying report of discrimination or harassment is unsubstantiated.

Participants who are asked to stop discriminatory or harassing behavior are expected to comply immediately. Upon receipt of a report of prohibited conduct, CAHON retains the right to take any steps deemed necessary and appropriate, including immediate removal from the event without warning or refund, to end the conduct and maintain a safe and welcoming environment for participants. Further, CAHON reserves the right to prohibit anyone who violates this policy from attending any future CAHON meeting or event. Misconduct can also result in the revocation of CAHON membership, including fellow status.

Reporting Unacceptable Behavior

Any person subjected or witness to discrimination or harassment is encouraged to report such conduct to CAHON management as soon as possible and may be asked to file a written report. CAHON staff are available for consultation with any meeting or event participant or attendee who believes they have experienced any form of harassment while at any CAHON meeting or event. Reports should include identification of the offender (or description); behaviors or actions by that person; circumstances around the incident; day, time, and session; and others present. All written reports will be kept confidential.

Upon receipt of a report, CAHON will review the available information, which may include speaking with the persons involved, and determine whether a policy violation has occurred. To the extent any person experiences or witnesses conduct that is criminal in nature, CAHON strongly encourages the person to also make a report to law enforcement.



2024 COF—Sponsor/Exhibitor Application & Agreement

Organization Information

Organization Name (*how it should appear in the program*): _____

(First, MI, Last): _____ Email: _____

Institution/Company: _____ Position Title: _____

Mailing Address: _____

City: _____ State: _____ Postal Code: _____

Sponsor Opportunities

Bronze: \$10,000

- Recognition as Industry Supporter on CAHON website for 1 month; small sized logo & description; logo included in event communications; quarter page advertisement; 1 complimentary registration; complimentary display table.

Silver: \$15,000

- Recognition as Industry Supporter on CAHON website for 3 months; medium sized logo & description; logo included in event communications; half page advertisement; 2 complimentary registrations; complimentary display table.

Gold: \$20,000

- Recognition as Industry Supporter on CAHON website for 6 months; large sized logo & description; logo included in event communications; half page advertisement; 3 complimentary registrations; complimentary display table

Platinum: \$25,000

- Recognition as Industry Supporter on CAHON website for 9 months; prominent sized logo & description; logo included in event communications; full page advertisement; 4 complimentary registrations; complimentary display table; 2 minute company introduction.

Diamond: \$30,000

- Recognition as Industry Supporter on CAHON website for 12 months; most prominent sized logo & description; logo included in event communications; full advertisement; 5 complimentary registrations; complimentary display table; 2 minute company introduction.

Exhibit Opportunities

Exhibit Display Table: \$3,000

- 6' skirted table top with 2 chairs; Small-sized logo; recognition as an exhibitor on the CAHON event website and logo included in printed program; 2 complimentary registrations.

Exhibit Display COI

Please list all competitive hematology/oncology-based pharmaceutical companies that you would prefer not to be placed next to.

Agreement

To accept the terms of the sponsor agreement, please sign your signature and date below:

Signature

Date



Sponsor/Exhibitor Application—CONTINUED

Payment Information

Full payment and completed application are due by **March 1, 2024**. Please retain a copy for your records.

TOTAL PAYMENT: \$ _____

Payment Options

Check enclosed Wire Transfer

Please make checks payable to the Chinese American Hematologist and Oncologist Network

Visa Mastercard Discover AMEX

Credit Card Number: _____ Expiration Date: _____

Cardholder's Name: _____

Cardholder's Signature: _____

Billing address same as organization address

Billing Address: _____

City: _____ State: _____ Postal Code: _____ Country: _____

CAHON Contact Information

For all sponsorship and exhibit questions, contracts, and payment:

CAHON Development Manager

Eli Gonzalez-Rehorst, MS

Phone: (414) 231-8241

Egonzalez-rehorst@cahon.org

CAHON Executive Office

555 East Wells Street, Suite 1100

Milwaukee, WI 53202

Phone: (414) 918-9890

Fax: (414) 276-3349

Email: info@cahon.org

Website: www.cahon.org

CAHON is a 501(c)(3) not-for-profit organization

Request for Taxpayer Identification Number and Certification

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

▶ Go to www.irs.gov/FormW9 for instructions and the latest information.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.

Chinese American Hematologist and Oncologist Netowrk, Inc.

2 Business name/disregarded entity name, if different from above

3 Check appropriate box for federal tax classification of the person whose name is entered on line 1. Check only **one** of the following seven boxes.

Individual/sole proprietor or single-member LLC C Corporation S Corporation Partnership Trust/estate

Limited liability company. Enter the tax classification (C=C corporation, S=S corporation, P=Partnership) ▶ _____

Note: 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 **not** 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.

Other (see instructions) ▶ **501 (c)(3) tax exempt corp**

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) **1**

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.

555 East Wells Street, Suite 1100

6 City, state, and ZIP code

Milwaukee, WI 53202

7 List account number(s) here (optional)

Requester's name and address (optional)

See Specific Instructions on page 3.

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.

Social security number									

or

Employer identification number									
2	0	-	3	6	6	2	2	7	5

Part II Certification

Under penalties of perjury, I certify that:

- 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
- 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
- I am a U.S. citizen or other U.S. person (defined below); and
- 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.

Sign Here Signature of U.S. person ▶ *Richard H. Hinton*

Date ▶ 7-26-2023

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.

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.