

# SCHEDULING SHEET FOR LT. GOVERNOR

DATE OF REQUEST: 6 / 2 / 2017  
BY WHOM: Elizabeth Ford / Darryl

DATE OF EVENT: 6 / 24 / 2017 DAY OF EVENT: Saturday

TIME: 5:00pm DRESS: Cocktail

NAME OF ENTITY / ORGANIZATION: Leeza Gibbons Care Connection, Irmo

NAME OF EVENT: Dare 2 Care Fair - Cocktail Party / Sponsor Recognition & Auction

LOCATION / ADDRESS OF EVENT: Columbia Convention Center  
1101 Lincoln Street

TRANSPORTATION? \_\_\_\_\_

PARTICIPATION: Speaking? X (How long? 10-15min) Attending? \_\_\_\_\_

Topic(s) or Details re Participation: Caregiving, Community partnerships  
LGOA partnering & supporting Leeza's Care Connection  
to provide services to caregivers

Need talking points? will provide if needed Speech? \_\_\_\_\_

CONTACT PERSON: Elizabeth Ford, LGOA

Phone Number(s): 803-734-9902 Cell (day of event): 803-238-8390

Cost of meal: \$ N/A Details: \_\_\_\_\_

Description and cost of plaque or other object presented: \_\_\_\_\_

Other cost(s): \_\_\_\_\_

Podium on site? \_\_\_\_\_ Schedule of events? \_\_\_\_\_

Needed at event (circle any and all that apply):

Podium - Display Table - LGOA Staff - Info. Bags - Books - Handouts - Photo - Video

Time of Table Set-up: \_\_\_\_\_ Time of Table Breakdown: \_\_\_\_\_

Number of Participants (anticipated): \_\_\_\_\_

**ATTACH E-MAIL OR OTHER CORRESPONDENCE RECEIVED PERTAINING TO EVENT**

\* Additional info for LGOA display table, etc will be provided to outreach staff