



CATHOLIC CHARITIES
GALA 2025
Saturday, April 5, 2025

Washington Hilton



Catholic Charities
ARCHDIOCESE OF WASHINGTON

CATHOLIC CHARITIES GALA 2025

GALA CO-CHAIRS

The families of
Patricia and Nicholas J. DeNovio
Anne and Bob Easby-Smith
Rose and Mark Lee



Inspiring Hope, Building Futures

*We served nearly 159,000 people
last year in the city of Washington, D.C.,
and five Maryland counties.*

- Over 4 million **meals** were served to those who were hungry and experiencing food insecurity.
- 2,361 adults had access to **employment referrals**.
- 8,733 people received **medical, mental health and dental care**.

Here's How That Was Possible...

- 6,331 individuals, organizations and foundations supported Catholic Charities' work with **gifts**.
- 3,390 people contributed more than 68,000 **volunteer hours**.
- \$22 million in **pro bono services** were provided to clients by doctors, dentists, lawyers, ESOL instructors, financial professionals and others.

Online registration is quick and easy!

Visit catholiccharitiesdc.org/gala
now to register as a sponsor today.

CATHOLIC CHARITIES GALA 2025

GALA CO-CHAIRS

The families of
Patricia and Nicholas J. DeNovio
Anne and Bob Easby-Smith
Rose and Mark Lee

Sponsorship Levels

These benefits are among other unique and branded items sponsors will receive:

SUPPORT LEVEL:	PRESENTING \$500,000	HEAL \$250,000	JUSTICE \$100,000	SHELTER \$50,000	FEED \$25,000	EMPOWER \$15,000	PROTECT \$10,000	TEACH \$5,000
Tax-deductible:	\$494,450	\$244,450	\$96,300	\$47,780	\$23,150	\$13,150	\$8,150	\$4,075
AT THE CATHOLIC CHARITIES GALA								
Event Concierge at Gala Table	★							
Champagne Service at Gala Table	★	★						
Gala Seats	30	30	20	12	10	10	10	5
Premier Seating	★	★	★	★				
MEDIA AND EVENT BRANDING EXPOSURE								
Ad in Gala Program**	Full page ad				Half page ad	Quarter page ad		
Exclusive Recognition in Gala Advertisement	★	★	★					
Social Media Spotlight	★	★	★	★				
Logo on Step and Repeat	★	★	★	★				
Listing as a Sponsor in Invitation*	★	★	★	★	★			
Listing as a Sponsor in Gala Program**	★	★	★	★	★	★	★	
Listing on Catholic Charities Website***	★	★	★	★	★	★	★	
Listing in Annual Report	★	★	★	★	★	★	★	★

Advertisement Specifications

SUBMISSIONS
Please submit your logo and listing via email to: Events@CC-DC.org
If you have any questions, please call Kimani Superville at (202) 772-4331.

GALA DEADLINES
* INVITATION: **January 10, 2025**
** PROGRAM: **March 7, 2025**

INTERACTIVE WEB LISTING* (\$50,000+)**
Logo Size:
149 pixels long x 224 pixels wide
Additional information needed:
website link

Online registration is quick and easy!

Visit catholiccharitiesdc.org/gala now to register as a sponsor today.

CATHOLIC CHARITIES GALA 2025

SATURDAY, APRIL 5, 2025
WASHINGTON HILTON

GALA CO-CHAIRS

The families of
Patricia and Nicholas J. DeNovio
Anne and Bob Easby-Smith
Rose and Mark Lee

Online registration

is quick and easy at:

catholiccharitiesdc.org/gala

Visit now to register
as a sponsor today.

Sponsorship Form

GALA SPONSORSHIP LEVELS

- | | | |
|--|--|--|
| <input type="radio"/> PRESENTING \$500,000 | <input type="radio"/> SHELTER \$50,000 | <input type="radio"/> PROTECT \$10,000 |
| <input type="radio"/> HEAL \$250,000 | <input type="radio"/> FEED \$25,000 | <input type="radio"/> TEACH \$5,000 |
| <input type="radio"/> JUSTICE \$100,000 | <input type="radio"/> EMPOWER \$15,000 | <input type="radio"/> OTHER _____ |

GUESTS/ATTENDANCE

- YES, it is my/our intention to join the Gala. I plan to confirm the number of seats by March 7, 2025.
 NO, I/we will not join the Gala and agree to waive any goods and services to be received.

SPONSOR INFORMATION

NAME/COMPANY: _____

Please print name(s) as it should appear in all sponsor listings.

Signature: _____ Date: _____

Contact Person: _____

If different from above.

Address: _____

Email: _____

Day Phone: _____ Cell Phone: _____

GIFT INFORMATION

- My company will match this gift.
 Check enclosed (Please make checks payable to Catholic Charities).
 Please charge my Visa/MasterCard/American Express in the amount of \$ _____

Personal Credit Card Business Credit Card

Cardholder's Name: _____

Card Number: _____ Expiration Date: _____

Security Code: _____ Signature: _____

(3 or 4 digit number on back of card)



PLEASE RETURN COMPLETED FORM TO:

Catholic Charities Gala 2025
Attn: Kimani Superville
924 G Street, NW
Washington, DC 20001

Please contact Kimani Superville at (202) 772-4331
or Events@CC-DC.org with questions.
Federal Tax ID # 53-0196524

OFFICE USE ONLY

RECEIVED ON _____
BY _____
TD _____
ID _____
SC _____