PA R T N E R S H I P

CHARITABLE DONATION REQUEST FORM

The Downtown Roseville Partnership is an action oriented, collaborative group that champions the creation of a vibrant and authentic downtown. We are proactive in promoting, marketing and providing services that attract businesses and visitors to Downtown Roseville. If your event/cause aligns with our values, and it takes place within Downtown Roseville, please fill out the form below.

All the following information is required for The Downtown Roseville Partnership LLC. (DRP)to consider your request. This form must be received 45 days prior to the event

Organization: Placer Breast Cancer Foundation Date: 8/19/2026

Contact Person: Hallie Romero Title: Vice-Chair of Events and Fundraising

Mailing Address: PO Box 513 City: Roseville Zip: 95747

Phone Number: 916-910-5769 Email: info@wethinkpink.org

Event Name: Hot Pink Fun Run Event Date: 9/20/26

Event Location: Downtown Roseville Vernon Square
Event Start and End Time: 7 AM to Noon

How many people do you expect at your event: 800

How many years have you been doing this event: 17

Please include the following information in your submission:

1. A description of your organization, including the mission and major accomplishments – Fact Sheet Attached

2. A copy of the letter from the IRS stating your organizations 501 (c) 3 status, if applicable: Included

3. A list of key staff and titles and current Board of Directors including officer status: Included

Contact person's relationship to the organization: Employee: Volunteer: X Paid Worker: Fund Raiser:

What services are rendered by your organization?
How will the donation be used? In support of our Mammo+ Bus which is making 3 visits to Roseville this year

What kind of advertising/signage and recognition will DRP receive?

- Eight entries in the race
- Booth location at event
- Mention by emcee at the event
- Logo displayed on event signage
- Logo displayed on all event advertising and marketing materials
- Logo displayed on event webpage
- Logo on runner t-shirt
- Dedicated post on PBCF's social media

What type of contribution are you seeking? (check one) Monetary

$1000 _____ (please be specific) _____

By what date do you need the contribution? 9/15/26

Will you be providing any admission to the event for the DRP: See above

Internal use only: Req #: _____ Date of Review:_____Approved: Denied: ____Conditions: _____

PLACER
Breast Cancer
FOUNDATION

Fact Sheet

Name	Placer Breast Cancer Foundation
Location	Placer County, CA PO Box 513, Roseville, CA 95661 Telephone: (916) 410-0243 Email: info@wethinkpink.org Website Address: www.wethinkpink.org
Date Formed	July 2005
Founders	Breast cancer Survivors Carol Garcia, Vice President of First Northern Bank and Sierra College Trustee and Teri Munger, Program Manager for American River College.
Purpose	The Placer Breast Cancer Endowment was formed with a goal to raise $1.5 million to endow a Breast Cancer Chair at the U.C. Davis Comprehensive Cancer Center. After reaching the $1.5 million dollar goal in 2014, the Endowment became the Placer Breast Cancer Foundation with the intention to continue the fight against breast cancer. The Foundation is a volunteer based group that includes breast cancer survivors and community activists dedicated to fighting breast cancer.
Fundraising Goal	The Placer Breast Cancer Foundation raises monies to fund breast cancer research, outreach and education in the five county region. These efforts include funding a study at UC Davis researching the effects of different treatments on Triple Negative breast cancer and continuing our health education and outreach to women in our community.
Amount Raised as of December 2025	$2.5 million has been raised by the Foundation since July 2005.
Members	Foundation membership and volunteers now number 120 active participants.
Nonprofit Status	The Placer Breast Cancer Foundation is a 501(c)3 non-profit organization (tax ID# 27-0690037) and contributions to the Foundation are tax deductible to the extent allowable by law.
Annual Operating Budget	The Foundation operates primarily as a volunteer organization with administrative costs associated with provided services per federal and state guidelines for non-profits.
Signature Events	The Foundation hosts the Hot Pink Fun Run, the Orange is the New Pink Orchard Dinner and the Placer Women's Retreat.
Donations	Donations are always welcome at any time and can be mailed to PBCF, PO Box 513, Roseville, CA 95661. A receipt will be provided by the Foundation.
Contacts	Stephanie Hill, Exec. Director, (916) 410-0243 or info@wethinkpink.org Carol Garcia, Chair, (916) 752-6185 or cgarcia@thatsmybank.com

INTERNAL REVENUE SERV E
P. O. BOX 2508
CINCINNATI, OH 45201

D RTMENT OF THE TREASURY

Date: DEC 2 9 2009

PLACER BREAST CANCER ENDOWMENT
C/O SCOTT DAULTON
2428 PROFESSIONAL DR STE 300
ROSEVILLE, CA 95661

Employer Identification Number:
27-0690037
DLN:
17053300340009
Contact Person:
SHEILA M ROBINSON ID# 31220
Contact Telephone Number:
(877) 829-5500
Accounting Period Ending:
June 30
Public Charity Status:
170(b)(1)(A)(vi)
Form 990 Required:
Yes
Effective Date of Exemption:
June 15, 2009
Contribution Deductibility:
Yes
Addendum Applies:
No

Dear Applicant:

We are pleased to inform you that upon review of your application for tax exempt status we have determined that you are exempt from Federal income tax under section 501(c)(3) of the Internal Revenue Code. Contributions to you are deductible under section 170 of the Code. You are also qualified to receive tax deductible bequests, devises, transfers or gifts under section 2055, 2106 or 2522 of the Code. Because this letter could help resolve any questions regarding your exempt status, you should keep it in your permanent records.

Organizations exempt under section 501(c)(3) of the Code are further classified as either public charities or private foundations. We determined that you are a public charity under the Code section(s) listed in the heading of this letter.

Please see enclosed Publication 4221-PC, Compliance Guide for 501(c)(3) Public Charities, for some helpful information about your responsibilities as an exempt organization.

PLACER BREAST CANCER ENDOWMENT

We have sent a copy of this letter to your representative as indicated in your power of attorney.

Sincerely,

Robert Choi
Director, Exempt Organizations
Rulings and Agreements

Enclosure: Publication 4221-PC

STATE OF CALIFORNIA
FRANCHISE TAX BOARD
PO BOX 1286
RANCHO CORDOVA CA 95741-1286

In reply refer to
755:G :SIK

January 25, 2010

PLACER BREAST CANCER ENDOWMENT
PO BOX 564
ROSEVILLE CA 95678-0564

Purpose	:	CHARITABLE
Code Section	:	23701d
Form of Organization	:	Corporation
Accounting Period Ending	:	June 30
Organization Number	:	3211481

EXEMPT DETERMINATION LETTER

We determined you are exempt from California franchise or income tax under the California Revenue and Taxation Code section shown above.

The tax-exempt status is effective as of 06/15/2009.

To retain exempt status, organizations are required to be organized and operating for nonprofit purposes within the provisions of the above section. An inactive organization is not entitled to exemption.

This decision is based on information you submitted and assumes that your present operations continue unchanged or conform to those proposed in your application. Any change in operation, character, or purpose of the organization must be reported immediately to this office so that we may determine the effect on your exempt status. Any change of name or address must also be reported.

In the event of a change in relevant statutory, administrative, judicial case law, a change in federal interpretation of federal law in cases where our opinion is based upon such an interpretation, or a change in the material facts or circumstances relating to your application upon which this opinion is based, this opinion may no longer be applicable. It is your responsibility to be aware of these changes should they occur. This

paragraph constitutes written advice, other than a chief counsel ruling, within the meaning of Revenue and Taxation Code Section 21012(a)(2).

For the organization's filing requirements, read enclosed Pub. 1068, Exempt Organizations - Requirements for Filing Returns and Paying Filing Fees. You may download the publication at www.ftb.ca.gov.

Note: This exemption is for state franchise or income tax purposes only. For information regarding sales tax exemption, contact the Board of Equalization at (800) 400-7115 or website www.boe.ca.gov.

M SIKICH
EXEMPT ORGANIZATIONS
BUSINESS ENTITIES SECTION
TELEPHONE (916) 845-4092
FAX NUMBER (916) 843-0187

EO :
CC :CAROL GARCIA

PLACER BREAST CANCER FOUNDATION | 20 years

2026 SPONSORSHIP OPPORTUNITIES

HOT PINK FUN RUN
BUBBLES & BREWS

$1000 Level
Suds Sponsor

- Eight entries in the race
- Booth location at event
- Mention by emcee at the event
- Logo displayed on event signage
- Logo displayed on all event advertising and marketing materials
- Logo displayed on event webpage
- Logo on runner t-shirt
- Dedicated post on PBCF's social media

$500 Level
Fizz Sponsor

- Four entries in the race
- Booth location at event
- Mention by emcee at the event
- Logo displayed on event signage
- Logo displayed on event webpage
- Name on runner t-shirt
- Dedicated post on PBCF's social media

$250 Level
Hops Sponsor

- Two entries in the race
- Mention by emcee at the event
- Name displayed on event signage
- Logo displayed on event webpage
- Name on runner t-shirt
- Mention on PBCF's social media

$150 Level
Booth Sponsor

- Vendor booth space
- Mention by emcee at the event
- Name displayed on event signage
- Mention on PBCF's social media

$150 Level
Kilometer Sign Sponsor

- Business name or logo on kilometer signs on run route

In-Kind Sponsorships are also welcome!

Company Name: _____

Contact Name: _____ **Email:** _____

Amount: ____ Check ____Visa ____ Mastercard ____AMEX ____ Discover

Card Number: _____ **Exp. Date:** _____ **3 Digit Code:** _____

Card Holder Name: _____

Card Billing Address: _____ **City:** _____ **State:** ____ **Zip:** _____

Signature: _____

Hot Pink Fun Run Level: ____ $1000 ____ $500 ____ $250 ____ $150

If your sponsorship level comes with a booth space, would you like to donate that space to a non-profit? _____

For more information please contact Stephanie Hill at director@wethinkpink.org or 916-410-0243.

The Placer Breast Cancer Foundation is a tax-exempt organization under Section 501(c)(3) of IRS code.
Please visit www.wethinkpink.org for more information.

Placer Breast Cancer Foundation

Board of Directors

Stephanie Hill, Executive Director

Carol Garcia, First Northern Bank
Chair 2024-2026

Kim Hoskinson, Blossoms and Balloons
Vice Chair 2025-2027

Andrew Tagg, First Northern Bank
Board Member 2025-2027

Cindy Picos, Community Volunteer
Secretary 2025-2027

Charlie Harrison, Sequoia Advisors
Board Member 2024-2026

Bruce Houdesheldt, Community Volunteer
Board Member 2024-2026

Michael Manfredi, Community Volunteer
Treasurer 2024-2026

Hallie Romero, Tommy Apostolos Fund
Board Member 2025-2027