



March 3, 2023

Dear Exhibitor

On behalf of course directors, Christopher Lamb, M.D., Maisha T. Robinson, M.D., and Devon I. Rubin, M.D., we hope you will consider exhibiting at our *Mayo Clinic Neurology in Clinical Practice 2023, which is held July 13-15, 2023, at The Westin Grand Cayman Seven Mile Beach Resort & Spa - Cayman Islands*. We expect around 150 neurologists, general internists, family physicians, and allied health personnel who treat patients with neurologic problems.

This course will serve as a review and update on the most recent advances in the diagnosis and treatment of common neurological clinical problems that face internists, family practitioners, neurologists, physicians, and nurse practitioners in their daily practices. The course is intended to provide an intensive, practical review with an emphasis on evidence-based approaches to everyday problems that span the realm of neurology. A didactic format will include the use of an interactive keypad system, video case presentations, and question and answer panel discussions. Clinical case correlations will be discussed during the presentations.

Display fees are \$2,500 for the length of the course. Space is limited and table assignments will be made on a first come, first served basis. To maintain a clear separation of promotion from education, all exhibits will be held in a different room/location than where the general sessions are held. Exhibits are open from registration until the conclusion of the final lecture on the last day. The basic exhibit fee will include a 6' skirted table with 2 chairs for a tabletop display; the attendee list including name, degree, specialty, city, state to be distributed at the course; and an acknowledgement with signage and announcements during the course. Additional Advertisement Opportunities are also available.

Mayo Clinic, an integrated, not-for-profit group practice, is committed to meeting its responsibility as a national medical education resource and is accredited by the Accreditation Council for Continuing Medical Education to provide 20.50 *AMA PRA Category 1 Credit(s)*TM for this course.

Our programs provide valuable information on unmet needs to the medical community. We sincerely appreciate your consideration and hope you will take the opportunity to join us for a truly unique educational program.

Sincerely,

A handwritten signature in cursive script that reads 'Denise L. Klarich'.

Denise Klarich
Education Administration Coordinator

Make checks payable to:

Mayo Clinic
Attn: Accounting Activity #23J01637
4500 San Pablo Road
Jacksonville, FL 32224

Tax ID: 59-3337028

Sponsorship Opportunities:

Premier Sponsorship Opportunities	Platinum \$40,000	Gold \$20,000	Silver \$10,000	Bronze \$5,000	Live Exhibit
Reception	x				
Non-CME Promotional Symposium	x	x			
Acknowledgement on signage at a breakfast or refreshment break	x	x	x		
Complimentary full registration- No CME credit	4	3	2	1	
Conference Bag Inserts	x	x	x	x	
Exhibit Table	(2) 6-foot table	(2) 6-foot table	(1) 6-foot table	(1) 6-foot table	(1) 6-foot table
Verbal recognition at opening session	x	x	x	x	x
Support Signage prominently displayed on-site at the conference	1 st Priority Placement	2 nd Priority Placement	3 rd Priority Placement	4 th Priority Placement	x
Limited Attendee List	x	x	x	x	x

Additional Advertisement Opportunities:

Reception - (Exclusive-Included with Platinum Sponsorship Level)

This reception features cocktails and hors d'oeuvres. The Sponsor will receive signage and recognition at the event along with cocktail napkins with your company's logo.

Non-CME Promotional Symposia- \$15,000

These non-accredited programs, independently developed and directly sponsored by industry, are presented in an educational format that will provide insight on new or controversial developments. Promotional symposia may not conflict with the Mayo Clinic Neurology in Clinical Practice 2023 programming. There are multiple dates and times available. (Includes food, beverage, and audio/visual equipment - No CME credit.)

Conference Bags - \$5,000 - (Exclusive)

Display your company logo for all attendees to see and announce your presence at the conference. Your company will provide a high-resolution logo to be printed on conference bags ordered by managing committee. All bags will contain flyers and advertisements from other participants. (Artwork to be provided by sponsoring company and is subject to MCSCPD approval)

Lanyards - \$3,000 (Exclusive)

All attendee badges will be distributed with a lanyard to display the badge throughout the conference. The Lanyard will prominently display your company name and logo. (Artwork to be provided by sponsoring company and is subject to MCSCPD approval)

Internet- \$3,000 (Exclusive)

Help attendees stay connected with their office and home while away at the Mayo Clinic Neurology in Clinical Practice 2023 conference. Sponsor the wireless internet access in the meeting space. The supporter will be recognized throughout the meeting in signage and electronic communications.

Hotel Key Card- \$3,000 (Exclusive)

Personalize hotel guest room keys with your company's logo or product promotion for immediate exposure to attendees. Use this as a great way to introduce yourselves to our attendees upon checking into the hotel. (Artwork to be provided by sponsoring company and is subject to MCSCPD approval)

Conference Bag Inserts- \$2,000

Conference bag inserts are a great opportunity to invite attendees to your booth, announce your booth participation or conference-related event. Your company will provide 200 copies of a flyer or booklet advertisement (no larger than 8 ½ x 11) and MCSCPD will stuff them into the official conference bags. Multiple Opportunities Available

Mayo Clinic School of Continuous Professional Development (MCSCPD) Exhibitor Agreement

Agreement between: ACCREDITED PROVIDER: Mayo Clinic College of Medicine and Science – MCSCPD AND:

Activity Title	Mayo Clinic Neurology in Clinical Practice	
Activity Number	23J01637	
Location	The Westin Grand Cayman Seven Mile Beach Resort & Spa - Cayman Islands	
Dates	July 13-15, 2023	
Company Name (Exhibitor) (as it should appear on printed materials)		
Exhibit Contact (if different then exhibit Rep.)		
Name(s) and email addresses of Representative(s) exhibiting: (Maximum of two representatives allowed per exhibit)		
Address		
Phone Number		
Email		
<input type="checkbox"/> The named exhibitor wishes to exhibit at the above-named activity in the amount of		\$2,500
Additional Opportunities: Please see Prospectus for Details		
<input type="checkbox"/> Platinum Sponsor		\$40,000
<input type="checkbox"/> Gold Sponsor		\$20,000
<input type="checkbox"/> Silver Sponsor		\$10,000
<input type="checkbox"/> Bronze Sponsor		\$5,000
<input type="checkbox"/> Non-CME Promotional Symposia		\$15,000
<input type="checkbox"/> Conference Bags (Exclusive)		\$5,000
<input type="checkbox"/> Lanyards (Exclusive)		\$3,000
<input type="checkbox"/> Hotel Key Cards (Exclusive)		\$3,000
<input type="checkbox"/> Conference Bag Inserts		\$2,000
Total Amount Due:		\$

NOTE: There may be additional charges depending on the meeting location (power, internet access, etc.)
List any additional requests, which may incur additional fees.

TERMS AND CONDITIONS

- EXHIBITOR agrees to abide by ACCME Standards for Commercial Support as stated at www.accme.org: SCS 4.2: “Product-promotion material or product-specific advertisement of any type is prohibited in or during CME activities. The juxtaposition of editorial and advertising material on the same products or subjects must be avoided. Live (staffed exhibits, presentations) or enduring (printed or electronic advertisements) promotional activities must be kept separate from CME.” “For live, face-to-face CME, advertisements and promotional materials cannot be displayed or distributed in the educational space immediately before, during or after a CME activity. **Providers cannot allow representatives of Commercial Interests to engage in sales or promotional activities while in the space or place of the CME activity.**”

- EXHIBITOR may only distribute educational promotional materials at their exhibit space. Distribution of non-educational items (pens, notepads, etc.), pharmaceuticals or product samples is prohibited.
- All exhibit fees associated with this activity will be given with the full knowledge of the PROVIDER. No additional payments, goods, services or events will be provided to the course director(s), planning committee members, faculty, joint provider, or any other party involved with the activity.
- Completion of this agreement represents a commitment and EXHIBITOR is obligated to provide full payment of all amounts due under this agreement by the ACTIVITY DATE unless otherwise agreed upon by the PROVIDER. PROVIDER reserves the right to refuse exhibit space to EXHIBITOR in the event of nonpayment or Code of Conduct violation.
- If this agreement is cancelled by either party forty-five (45) days or more in advance of the Activity Date, PROVIDER will refund the Exhibit Fee less a \$300 processing fee. If this agreement is cancelled by EXHIBITOR less than forty-five (45) days in advance of the Activity Date, the total amount due under this Agreement shall be immediately due and payable to PROVIDER.
- PROVIDER agrees to provide exhibit space and may acknowledge EXHIBITOR in activity announcements. PROVIDER reserves the right to assign exhibit space or relocate exhibits at its discretion.

Note: All exhibitors must be approved by MCSCPD and this agreement is not binding until both parties have signed. MCSCPD maintains the right to refuse any exhibitor.

By signing below, I agree to the “Terms and Conditions” outlined on Page 1 of this Exhibitor Agreement (including ACCME Standards for Commercial Support):

The person signing below is authorized to enter into this agreement:

Exhibitor Representative Name	Signature	Date
Mayo Clinic Representative Name	Signature	Date

PAYMENT INFORMATION

Please indicate your method of payment:

PROVIDER **Federal Tax ID number:** 59-3337028

<input type="checkbox"/> Check	<input type="checkbox"/> Credit Card
Make payable to Mayo Clinic and remit to: Mayo Clinic Attn: Accounting Activity #23J01637 4500 San Pablo Road Jacksonville, FL 32224 Identify: Neurology in Clinic Practice #23J01637 on the check.	For payment by credit card, please call the MCSCPD at 800-462-9633 . Reference activity # 23J01637 when calling. <i>Do not send credit card information via email.</i>

Neurology in Clinical Practice 2023

July 13 – 15, 2023

Thursday	July 13, 2023
12:00 p.m.	Registration
	Stroke / CV
12:30 p.m.	Acute Stroke Diagnosis and Management Josephine Huang, M.D.
1:00	Secondary Prevention of Stroke Cumara O'Carroll, M.D.
1:30	Aneurysms, Cerebrovascular Malformations TBD, M.D.
2:00	Q&A
2:15	Break and Exhibits
	Autoimmune/Demyelinating
2:30	Multiple Sclerosis: Diagnosis Iris Vanessa Marin Collazo, M.D.
3:00	Multiple Sclerosis: Treatment Iris Vanessa Marin Collazo, M.D.
3:30	Myelopathies Neeraj Kumar, M.D.
4:00	Autoimmune and Paraneoplastic Neurologic Disorders Alfonso Sebastian Lopez Chiriboga, M.D.
4:30	Q&A
4:45	Break and Exhibits
	Case Presentations
4:45	Case Presentations & Discussions: Cerebrovascular and Autoimmune Neurology Cases Josephine Huang, M.D., Alfonso Sebastian Lopez Chiriboga, M.D.
5:45	Adjourn
Friday	July 14, 2023
6:30 a.m.	Registration / Breakfast
	Neurodegenerative
7:00	Initial Evaluation of Mild Cognitive Impairment and Dementia Meredith Wicklund, M.D.
7:30	Novel Therapies in Neurodegenerative Disorders Neill Graff-Radford, M.D.
8:00	Non-Alzheimer's Disease Dementias Philip Tipton, M.D.
8:30	Parkinson's and Parkinsonian-Plus Shyamal Mehta, M.D., Ph.D.
9:00	Q&A
9:15	Break & Exhibits
	Neuromuscular/Autonomic
9:30	Peripheral Neuropathy: Basics and Treatment Updates Devon I. Rubin, MD
10:00	Myasthenia Gravis and Neuromuscular Junction Disorders Treatment Updates Elliot L. Dimberg, MD
10:30	Neurogenic Orthostatic Hypotension Diagnosis and Management Kamal Shouman, M.D.

11:00	Novel and Forthcoming Genetic Neuromuscular Therapies Nicolas Madigan, M.B.B.Ch., Ph.D.
11:30	Q&A
11:45	Pick up Lunch
	Spine / Pain
12:00 p.m.	Neurologic Red Flags in Neck and Back Pain Christine Hunt, D.O.
12:30	Neuropathic Pain Management Narayan Kissoon, M.D.
1:00	Q&A
1:15	Break and Exhibits
	Case Presentations / Interactive Discussion
1:30	Case Presentations: Dementia, Movement Disorder, Neuromuscular, and Pain Cases Philip Tipton, M.D., Shyamal Mehta, M.D, Ph.D., Christy Hunt, D.O., Devon Rubin, MD (NM)
3:30	Adjourn
Saturday	July 15, 2023
6:30 a.m.	Registration / Breakfast
	Epilepsy/Sleep
7:00	Approach to Seizures and Spells Joseph Sirven, D.O.
7:30	Treatment of Women and Men with Epilepsy Katherine Noe, M.D., Ph.D.
8:00	Status Epilepticus: Diagnosis and Management Jennifer Fugate, M.D.
8:30	Common Sleep Diagnoses and Management Brynn Dredla, M.D.
9:00	Q&A
9:15	Break & Exhibits
	Headache
9:30	Headache: When to Worry Olga Fermo, M.D.
10:00	Approach to Abortive and Preventative Migraine Therapies Rashmi Halker Singh, M.D.
10:30	General Neuro-ophthalmology Review Eric Eggenberger, D.O.
11:00	Concussion and Traumatic Brain Injury Juliana VanderPluym, M.D.
11:30	Q&A
11:45	Pick up lunch
	Neuro Onc/Infx
12:00 p.m.	Primary Brain Tumors Alyx Porter, M.D.
12:30	CNS Infections, Including Neurologic manifestations of COVID-19 Allen Aksamit, M.D.
1:00	Q&A
1:15	Break and Exhibits
	Case Presentations / Interactive Discussion
1:30	Case Presentations/Discussion: Palliative Care in Neurology, Epilepsy, COVID-19, and Headache Maisha Robinson, M.D., Joseph Sirven, M. D, Alyx Porter, M.D., Allen Aksamit, M.D., Olga Fermo M.D.
3:30	Adjourn

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.

Print or type. See Specific Instructions on page 3.	1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank. Mayo Clinic Jacksonville	
	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.	
	<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) ▶ _____ 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.	
	<input checked="" type="checkbox"/> Other (see instructions) ▶ <u>501(c)(3) Tax-exempt Nonprofit Corporation</u>	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):	
	Exempt payee code (if any) <u>1</u> Exemption from FATCA reporting code (if any) <u>A</u> <small>(Applies to accounts maintained outside the U.S.)</small>	
5 Address (number, street, and apt. or suite no.) See instructions. 4500 San Pablo Road		
6 City, state, and ZIP code Jacksonville, FL 32224		
7 List account number(s) here (optional)		
		Requester's name and address (optional)

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										
5	9		-	3	3	3	7	0	2	8

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 ▶ <i>Katy Domaille</i>	Date ▶ <i>01/02/2023</i>
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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.

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.