



34th Annual Daniel E. Waite Lectureship in Oral and Maxillofacial Surgery

Saturday, April 20, 2024

Rochester, MN | Live In-Person or Livestream

Commercial Support Prospectus

Greetings,

On behalf of course directors Dr. Kevin Arce and Dr. Christopher Viozzi, and the Mayo Clinic School of Continuous Professional Development we are pleased to invite you to the **34th Annual Daniel E. Waite Lectureship in Oral and Maxillofacial Surgery**, April 20, 2024.

Course Description:

This event is sponsored collaboratively by the Mayo Clinic Division of Oral and Maxillofacial Surgery, the Minnesota Society of Oral and Maxillofacial Surgery, and the Waite Endowment, University of Minnesota. Guest speaker for 2024 will be Richard Shaw MD, Liverpool, England; Consultant Oral & Maxillofacial / Head & Neck Surgeon.

Target Audience:

This course is designed for Dentists, Physicians, Residents/Fellows, Scientists/Researchers, and Students. Our attendance goal for 2024 is 75+.

Exhibit & Sponsorship Information:

Mayo Clinic recognizes these types of educational programs would not be possible without your support. We invite you to participate in this educational activity with a sponsorship opportunity or exhibit table in the amount of \$1750.00. Details are listed below. In support of ACCME guidelines, commercial support will be in a separate area from the educational activity. This event is open to multiple pharmaceutical companies.

To receive a guaranteed space for exhibiting and/or course sponsorship, please complete our letter of agreement Monday, March 26, 2024. For your convenience, Mayo Clinic's Tax ID is 41-6011702.

If you have any questions, please feel free to contact us.

Sincerely,

Mallory Hedquist
CME Specialist

Kris Jones
Education Coordinator

Mayo Clinic School of Continuous Professional
Development
200 First Street SW
Rochester, MN 55905

Phone: 507-266-3071
E-mail: jones.kristen@mayo.edu

Sponsorship Opportunities

Benefits of sponsorship:

- Interact face-to-face with numerous medical professionals,
- Build visibility for your company in a competitive marketplace,
- Expand your customer base and strengthen existing customer relationships,
- Introduce new products and services,
- Additional advertisement opportunities to expand reach and further socialize with attendees.

Sponsorships range from \$4,000 to \$10,000 and feature various perks that include but are not limited to the options below. Please email Mallory Hedquist, Hedquist.mallory@mayo.edu, and Kris Jones, jones.kristen@mayo.edu, for more information on alternative opportunities.

A signed letter of agreement is required to secure your sponsorship, this agreement form will be sent after sponsorship details are agreed upon. Email Mallory Hedquist, hedquist.mallory@mayo.edu, and Kris Jones, jones.kristen@mayo.edu, for information and to secure your sponsorship.

Opportunity	Fee	Fee Includes
Gold Level	\$10,000	<ul style="list-style-type: none">• Your company logo or name posted on multiple signs throughout the course space,• Three complimentary registrations to the course for your company representatives,• One 6' exhibit table for two representatives for the length of the conference,• Sponsorship acknowledgement on webpage, announcements, and at break times during the course,• Access to networking opportunities throughout the course,• Receive a list of conference attendees.
Silver Level	\$7,000	<ul style="list-style-type: none">• Your company logo or name posted on signage,• Two complimentary registrations to the course for your company representatives,• One 6' exhibit table for two representatives for the length of the conference,• Sponsorship acknowledgement on webpage, announcements, and at break times during the course,• Access to networking opportunities throughout the course,• Receive a list of conference attendees.
Bronze Level	\$4,000	<ul style="list-style-type: none">• Your company logo or name posted on signage,• One complimentary registration to the course for your company representative,• One 6' exhibit table for two representatives for the length of the conference,• Sponsorship acknowledgement on webpage, announcements, and at break times during the course,• Access to networking opportunities throughout the course,• Receive a list of conference attendees.

Exhibit Opportunities

Technical and educational exhibits provide a professional and educational environment in which physicians can receive demonstrations, view products and services and discuss the clinical and surgical uses of these products and services, including how they may improve the quality of care and the management of the medical/surgical practice. Additionally, the exhibits enhance the educational content of the meeting helping to provide quality continuing medical education.

Benefits Include:

- Interact face-to-face with numerous medical professionals,
- Build visibility for your company in a competitive marketplace,
- Expand your customer base and strengthen existing customer relationships,
- Advertisement opportunities to expand reach and further socialize with attendees,
- Introduce new products and services.

[Click here to secure your exhibit table](#)

A signed letter of agreement is required to secure your exhibit table.

Opportunity	Fee	Fee Includes
Exhibit Table	\$1,750	<ul style="list-style-type: none">• One 6' exhibit table for two representatives for the length of the conference,• Sponsorship acknowledgement on course webpage, announcements, and at break times during the course,• Access to networking opportunities throughout the course,• Receive a list of conference attendees.
Exhibit Hours Set Up – April 19 – TBD April 20, 2024 – 7:30am-2:45pm Tear Down – April 20, 2024, conclusion of course		

Payment Details

Mayo Clinic Tax ID: 41-6011702

Make check payable to:

Mayo Clinic – MCSCPD, 200 First St SW, Plummer 2-60, Attn: Kris Jones
Rochester, MN 55905

Reference: Waite 2024 – 24R00739

Credit Card payments:

To pay by credit card, please call 800-323-2688.

Reference: Waite 2024 – 24R00739



School of Continuous
Professional Development

34th Annual Daniel E. Waite
Lectureship in Oral and Maxillofacial
Surgery 2024

April 20, 2024 Live & Livestream
All Times listed in Central Time Zone

Saturday, April 20	
7:30am	Registration & Breakfast
8:30am	Minnesota Society of Oral Maxillofacial Surgeons Business Meeting <i>No CE Credit</i>
9:30am	Welcome and Introduction Kevin Arce, M.D., D.M.D., Mayo Clinic Rochester Christopher F. Viozzi, M.D., D.D.S., Mayo Clinic Rochester
9:45am	Tribute to Dr. Daniel E. Waite <i>Peter D Waite MPH DDS MD FACS</i>
10:15am	Refreshment Break
10:30am	Complex Maxillary Reconstruction: The Liverpool Experience <i>Professor Richard J. Shaw MD FDS FRCS(OMFS)</i> <i>Department of Head and Neck Surgery, University of Liverpool</i>
11:15am	Contemporary Management of Osteoradionecrosis: The Clinical Trials View <i>Professor Richard J. Shaw MD FDS FRCS(OMFS)</i> <i>Department of Head and Neck Surgery, University of Liverpool</i>
12:00 PM	Lunch
1:00pm	Integrating Oral and Maxillofacial Surgery into an Academic Head and Neck Center <i>Professor Richard J. Shaw MD FDS FRCS(OMFS)</i> <i>Department of Head and Neck Surgery, University of Liverpool</i>
1:45pm	Question & Answer
2:15pm	Closing Remarks Kevin Arce, M.D., D.M.D., Mayo Clinic Rochester Christopher F. Viozzi, M.D., D.D.S., Mayo Clinic Rochester
2:30pm	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	
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) ▶ 501 (c)(3) tax-exempt non-profit organization	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. 200 First Street Sw	Requester's name and address (optional)
6 City, state, and ZIP code Rochester, MN 55905	
7 List account number(s) here (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												
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> </tr> </table>												
or												
Employer identification number												
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">4</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">1</td> <td style="border: 1px solid black; width: 20px; height: 20px;"></td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">-</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">6</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">0</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">1</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">1</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">7</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">0</td> <td style="border: 1px solid black; width: 20px; height: 20px; text-align: center;">2</td> </tr> </table>	4	1		-	6	0	1	1	7	0	2	
4	1		-	6	0	1	1	7	0	2		

Part II Certification

Under penalties of perjury, I certify that:

1. 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
2. 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
3. I am a U.S. citizen or other U.S. person (defined below); and
4. 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>Kelly M. Huneke</i>	Date ▶ <i>1/2/2024</i>
------------------	---	------------------------

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.