



Dear Exhibitor,

On behalf of course directors Jeffrey Britton, M.D., Sanjeet Grewal, M.D., and William Tatum, D.O. we hope you will consider a display opportunity at our **10th Annual Mayo Epilepsy in Clinical Practice** course held **February 5-7, 2026**, at **Wyndham Grand Rio Mar Rainforest Beach and Golf Resort in Rio Grande, Puerto Rico**. We expect approximately 125 practicing neurologists, physicians, and staff who are involved in the care of patients with seizures and epilepsy.

The course focuses on a review of current clinical practice related to recognizing seizures and epilepsy in conjunction with adjunctive EEG testing and includes details about how technology can lead to incorrect diagnosis and treatment. An interactive and didactic format includes multimedia presentations and allows audience participation. The course has opportunities for participants to ask questions on the cases discussed or to present their own cases to the faculty panel.

Display Fees for this 3-day course are as follows:
\$2,500 – Live Exhibit

Space is limited and table assignments will be made on a first-come, first-served basis. We are offering additional advertisement/sponsorship opportunities to expand reach and further socialize with attendees.

Live Exhibit Benefits:

- Promotion available at the live 3-day course from registration until the conclusion of the final lecture on the last day
- Exhibitors are provided the same meals and beverages provided to registered attendees.
- Attendees are encouraged daily by the course moderator to visit and connect with the exhibitors.
- Includes a 6-foot table and two chairs.
- 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.

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 12.75 AMA PRA Category 1 Credit(s)[™] 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,

Olivia Spradlin

Olivia Spradlin
Education Administration Coordinator

Make checks payable to:
Mayo Clinic Florida
4500 San Pablo Road
Jacksonville, FL 32224
Attn: Accounting Activity #5326J01213

Tax ID: 59-3337028

Sponsorship Opportunities:

Premier Sponsorship Opportunities	Platinum \$40,000	Gold \$30,000	Silver \$15,000	Bronze \$7,000	Live Exhibit \$2,500
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- \$30,000

Non-accredited programs will be independently developed and directly sponsored by industry, and presented in an educational format that will provide insight on new or controversial developments. Promotional symposia may not conflict with the 10th Annual Mayo Epilepsy in Clinical Practice 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 the managing committee. All bags will contain flyers and advertisements from other participants. (Artwork to be provided by the 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 the 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 10th Annual Mayo Epilepsy in Clinical Practice 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 150 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

**Request for Taxpayer
Identification Number and Certification**

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
requester. Do not
send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See Specific Instructions on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.) Mayo Clinic Jacksonville	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes. <input type="checkbox"/> Individual/sole proprietor <input type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input checked="" type="checkbox"/> Other (see instructions) 501 (c) (3) Tax-exempt Nonprofit Corporation	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3): Exempt payee code (if any) 1 Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) A (Applies to accounts maintained outside the United States.)
	3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>	
	5 Address (number, street, and apt. or suite no.). See instructions. 4500 San Pablo Road	Requester's name and address (optional)
6 City, state, and ZIP code Jacksonville, FL 32224		
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. See also *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>04/25/2024</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.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they