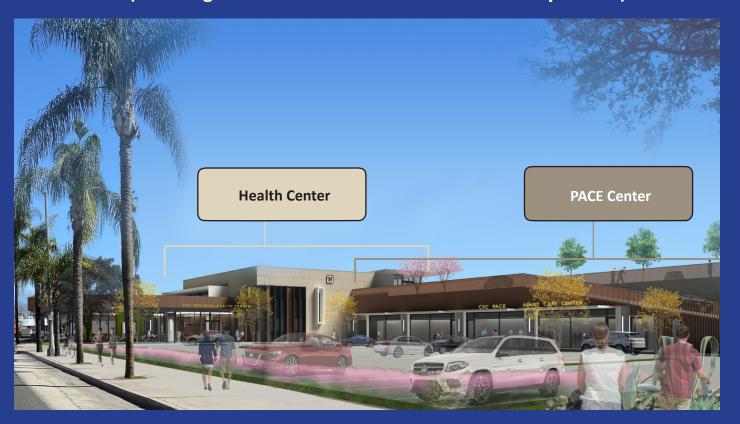




## **Capital Campaign**

## **CSC Health Center & PACE Center**

(The Program of All Inclusive Care for the Elderly Center)



726 East Main Street, Alhambra, CA 91801 csc.Alhambra@cscla.org

Please scan the QR code for the donation mapping:



#### **Chinatown Service Center**

711 W. College Street, Suite 388, Los Angeles, CA 90012 www.cscla.org | (213) 808-1761



www.cscla.org

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Irene Li Williams Cathay Bank Dear Friends,

On behalf of Chinatown Service Center (CSC), we are excited to announce a new capital campaign – CSC Health and PACE (Program of All-inclusive Care for the Elderly) Centers in Alhambra, CA. And we'd like to invite you to join us in our efforts!

This large-scale fundraiser has a lofty goal of \$9 million to renovate a 43,000-square-foot, two-story building and provide comprehensive services, including Family Practice, Podiatry, Optometry, Dental, Behavioral Health, Pharmacy, Pediatrics, and a Café. Specifically, CSC is establishing our first "PACE Center" with staff who are multi-lingual to serve seniors in the San Gabriel Valley and surrounding areas.

CSC has been committed to "thriving lives in empowered communities" since 1971 when we started from Los Angeles Chinatown. With your support, we've been able to make great strides in these areas, but we know that there is still much more work to be done. That's why we're launching this campaign to raise the funds we need to operate the programs, which will have a transformative impact on our ability to fulfill our mission.

This is a critical time in our organization's history, and we need your continuous support to make our vision a reality. We believe that with your help, we can reach more than 100,000 visits per year and make the community a better place. This project is aimed to be opened in 2024. We'll provide regular updates on our progress and milestones achieved.

We respectfully ask for your consideration and hope that you can join us in this important endeavor.

Please see the attached information from the Capital Campaign Committee and how you can designate your generous contribution. If you have any questions, please do not hesitate to contact Elyse Hwu at ehwu@cscla.org or (213) 808-1761. Thank you very much for your support!

Best Regard,

Peter Ng

CEO, Chinatown Service Center

LOS ANGELES MAIN OFFICE 767 N. HILL ST SUITE 400 LOS ANGELES, CA 90012 (213)808-1700 LOS ANGELES OFFICE 711 W. COLLEGE ST LOS ANGELES, CA 90012 (213)808-1700 MONTEREY PARK SOCIAL SERVICES 112 N. CHANDLER AVE. SUITE 105, MONTEREY PARK, CA 91754 (626)293-8733 MONTERFY PARK HEALTH CLINIC 855 S. ATLANTIC BLVD. MONTEREY PARK, CA 917554 (626)988-8087 ALHAMBRA HEALTH CLINIC 320 S. GARFIELD AVE. ALHAMBRA, CA 91801 (626)773-3388 SAN GABRIEL HEALTH CLINIC 555 W. LAS TUNAS Dr. SAN GABRIEL, CA 91776 (626)457-9616



#### STERRE S Medical Conference Room TOLET TOLET Leisure Balcony STAIR2 **Medical Center** Medical Staff Lounge STAFF Cafe TOLET Child Play Area CL.EAN HOL.DING **Pediatric Section** 2/F Entry <u>-ර</u> Bench -Ó Donor Brick (250) Garden 1 Donor Brick (250) • Planter (10) -Ó • Bench (9) Donor Brick \$1,000 Each \$2,000 Each \$5,000 Each \$5,000 Each \$ 10,000 Dental Station (8) \$ 10,000 Dental X-Ray Room Optic Exam Room (2) Optic Office Optic Staff Office PED Doctors Office Pediatric Room (5) Medical Conference RoomMedical Staff Lounge Overlook ROOFTOP PARKING 48 STALLS CSC Health Center & PACE Center - 2nd Floor \$25,000 • Garden 2 Each • Overlook Child Play Area \$20,000 Fach Garden 2 \$100,000 | Rooftop Lobby Each | Optometry Section Dental Section Bench Ped CorridorOptic CorridorDental Corridor 1Dental Corridor 2 Pediatric Section2nd Floor EntryGarden 1 Leisure Balcony sr.nr.s Donor Brick \$50,000 Each \$75,000 Each





Selection	Color code	Items Medical Building	Floor G/F	Quantity 1	Suggested Each Donations		Sponsor Amount	Pledged
					\$	2,000,000	Pledged	√ √
		PACE Center	G/F	1	\$	2,000,000		
		Medical Wing	G/F	1	\$	250,000	Pledged	√ √
		PACE Wing	G/F	1	\$	250,000		
		Garden + Fountain	G/F	1	\$	150,000	Pledged	√
		Day Room 1	G/F	1	\$	100,000	Pledged	√
		Day Room 2	G/F	1	\$	100,000		
		Day Room 3	G/F	1	\$	100,000		
		Day Room 4	G/F	1	\$	100,000		
		Medical Lobby	G/F	1	\$	100,000	Pledged	√
		Elevator 1	G/F	1	\$	100,000		
		Elevator 2	G/F	1	\$	100,000		
		Nurse Station 1	G/F	1	\$	50,000	Pledged	√
		PACE Lobby	G/F	1	\$	50,000	Pledged	√
		PACE Courtyard	G/F	1	\$	50,000	Pledged	√
		PACE Corridor 1	G/F	1	\$	50,000	Pledged	√
		Medical Support Counter	G/F	1	\$	50,000		
		Kitchen	G/F	1	\$	50,000		
		PACE Admin Office	G/F	1	\$	50,000	Pledged	√
		Medical Corridor 1	G/F	1	\$	30,000	Pledged	√
		Medical Corridor 2	G/F	1	\$	30,000	Pledged	√
		Medical Corridor 3	G/F	1	\$	30,000	Pledged	√
		Staff Access Corridor	G/F	1	\$	30,000		
		PACE Corridor 2	G/F	1	\$	30,000	Pledged	√
		Pharmacy 4-1	G/F	1	\$	25,000	Pledged	√
		Pharmacy 4-2	G/F	1	\$	25,000	Pledged	√
		Pharmacy 4-3	G/F	1	\$	25,000	Pledged	√
		Pharmacy 4-4	G/F	1	\$	25,000	Pledged	√
		PACE Computer Room	G/F	1	\$	25,000	Pledged	√
		Card & Mahjong Room	G/F	1	\$	25,000	Pledged	√
		PACE Patient Lounge	G/F	1	\$	25,000	Pledged	1
		Physical Therapy Room	G/F	1	\$	25,000	Pledged	1
		Director Office	G/F	1	\$	25,000		
		Logistic Office	G/F	1	\$	25,000		
		Lift	G/F	1	\$	25,000		

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Selection	Color code	Items	Floor	Quantity	Suggested Each Donations		Sponsor Amount	Pledged
		Lab Room	G/F	1	\$	20,000	Pledged	√
		PACE Conference Room	G/F	1	\$	20,000	Pledged	√
		PACE Staff Lounge	G/F	1	\$	20,000	Pledged	√
		Assistant Director Office	G/F	1	\$	20,000		
		Vital Check Room	G/F	1	\$	10,000	Pledged	√
		Behavioral Health Room 1	G/F	1	\$	10,000	Pledged	√
		Behavioral Health Room 2	G/F	1	\$	10,000	Plaqued	√
		Behavioral Health Room 3	G/F	1	\$	10,000	Plaqued	√
		Behavioral Health Room 4	G/F	1	\$	10,000	Pledged	√
		Nurse Station 2	G/F	1	\$	10,000	Pledged	√
		Medical Exam Room 1	G/F	1	\$	10,000	Pledged	√
		Medical Exam Room 2	G/F	1	\$	10,000	Pledged	√
		Medical Exam Room 3	G/F	1	\$	10,000	Pledged	√
		Medical Exam Room 4	G/F	1	\$	10,000	Pledged	√
		Medical Exam Room 5	G/F	1	\$	10,000	Pledged	√
		Medical Exam Room 6	G/F	1	\$	10,000	Pledged	√
		Medical Exam Room 7	G/F	1	\$	10,000	Pledged	√
		Medical Exam Room 8	G/F	1	\$	10,000	Pledged	√
		Medical Exam Room 9	G/F	1	\$	10,000	Pledged	√
		Medical Exam Room 10	G/F	1	\$	10,000	Pledged	√
		Medical Exam Room 11	G/F	1	\$	10,000	Pledged	√
		Medical Exam Room 12	G/F	1	\$	10,000	Pledged	√
		PACE Quiet Room	G/F	1	\$	10,000	Pledged	√
		PACE Nurse Station	G/F	1	\$	10,000	Pledged	1
		PACE Waiting Room	G/F	1	\$	10,000	Pledged	<b>√</b>
		PACE Exam Room 1	G/F	1	\$	10,000	Pledged	√
		PACE Exam Room 2	G/F	1	\$	10,000	Pledged	√
		PACE Exam Room 3	G/F	1	\$	10,000	Pledged	<b>√</b>
		PACE Exam Room 4	G/F	1	\$	10,000	Pledged	√
		Eligibility Station 1	G/F	1	\$	10,000	Pledged	√
		Eligibility Station 2	G/F	1	\$	10,000	Pledged	1
		Eligibility Station 3	G/F	1	\$	10,000	Pledged	√
		Eligibility Station 4	G/F	1	\$	10,000	Pledged	√
		PACE Staff Office 1	G/F	1	\$	5,000	Pledged	√
		PACE Staff Office 2	G/F	1	\$	5,000	Pledged	<b>√</b>
		PACE Staff Office 3	G/F	1	\$	5,000	Pledged	1





Selection	Color code	Items PACE Staff Office 4	Floor G/F	Quantity 1	Suggested Each Donations		Sponsor Amount	Pledged
					\$	5,000	Pledged	√
		PACE Staff Office 5	G/F	1	\$	5,000	Pledged	√ √
		PACE Staff Office 6	G/F	1	\$	5,000		
		PACE Staff Office 7	G/F	1	\$	5,000	Pledged	√ √
		PACE Staff Office 8	G/F	1	\$	5,000	Pledged	√
		PACE Staff Office 9	G/F	1	\$	5,000	Pledged	√
		PACE Staff Office 10	G/F	1	\$	5,000	Pledged	√ √
		Donor Brick (L)	G/F	250	\$	2,000		5 √
		Donor Brick (S)	G/F	250	\$	1,000		1 √
		Donor wall	G/F	500	\$	1,000		18 √
		Dental Section	2/F	1	\$	100,000	Pledged	√ √
		Optometry Section	2/F	1	\$	100,000		
		Rooftop Lobby	2/F	1	\$	100,000		
		Pediatric Section	2/F	1	\$	75,000		
		2nd Floor Entry	2/F	1	\$	75,000		
		Garden 1	2/F	1	\$	75,000	Pledged	√
		Leisure Balcony	2/F	1	\$	50,000		
		Ped Corridor	2/F	1	\$	30,000		
		Optic Corridor	2/F	1	\$	30,000		
		Dental Corridor 1	2/F	1	\$	30,000		
		Dental Corridor 2	2/F	1	\$	30,000		
		Child Play Area	2/F	1	\$	25,000	Pledged	√
		Garden 2	2/F	1	\$	25,000	Pledged	√
		Overlook	2/F	1	\$	25,000	Pledged	√
		Medical Conference Room	2/F	1	\$	20,000	Pledged	√ √
		Medical Staff Lounge	2/F	1	\$	20,000	Pledged	√ √
		Dental Office 1	2/F	1	\$	10,000	Pledged	1
		Dental Office 2	2/F	1	\$	10,000	Pledged	√ √
		Dental Station 1	2/F	1	\$	10,000	Pledged	1
		Dental Station 2	2/F	1	\$	10,000	Pledged	1
		Dental Station 3	2/F	1	\$	10,000	Pledged	1
		Dental Station 4	2/F	1	\$	10,000	Pledged	1 1
		Dental Station 5	2/F	1	\$	10,000	Pledged	1 1
		Dental Station 6	2/F	1	\$	10,000	Pledged	1 1
		Dental Station 7	2/F	1	\$	10,000	Pledged	1 1
		Dental Station 8	2/F	1	\$	10,000	Pledged	1 1





Selection	Color code	Items	Floor	Quantity		ggested Donations	Sponsor Amount	Pledged
		Dental X-Ray Room	2/F	1	\$	10,000	Pledged	√
		Optic Exam Room 1	2/F	1	\$	10,000	Pledged	√
		Optic Exam Room 2	2/F	1	\$	10,000	Pledged	√
		Optic Office	2/F	1	\$	10,000	Pledged	√
		Optic Staff Office 1	2/F	1	\$	10,000	Pledged	√
		Optic Staff Office 2	2/F	1	\$	10,000	Pledged	√
		Ped Doctors Office	2/F	1	\$	10,000		
		Pediatric Room 1	2/F	1	\$	10,000	Pledged	√
		Pediatric Room 2	2/F	1	\$	10,000	Pledged	<b>√</b>
		Pediatric Room 3	2/F	1	\$	10,000	Pledged	√
		Pediatric Room 4	2/F	1	\$	10,000	Pledged	√
		Pediatric Room 5	2/F	1	\$	10,000	Pledged	1
		Planter 1	2/F	1	\$	5,000		
		Planter 2	2/F	1	\$	5,000		
		Planter 3	F	1	\$	5,000		
		Planter 4	2/F	1	\$	5,000		
		Planter 5	2/F	1	\$	5,000		
		Planter 6	2/F	1	\$	5,000		
		Planter 7	2/F	1	\$	5,000		
		Planter 8	2/F	1	\$	5,000		
		Planter 9	2/F	1	\$	5,000		
		Planter 10	2/F	1	\$	5,000		
		Bench 1	2/F	1	\$	5,000	Pledged	<b>√</b>
		Bench 2	2/F	1	\$	5,000	Pledged	√ √
		Bench 3	2/F	1	\$	5,000		
		Bench 4	2/F	1	\$	5,000	Pledged	<b>√</b>
		Bench 5	2/F	1	\$	5,000		
		Bench 6	2/F	1	\$	5,000		
		Bench 7	2/F	1	\$	5,000		
		Bench 8	2/F	1	\$	5,000		
		Bench 9	2/F	1	\$	5,000		
		Donor Brick (L)	2/F	250	\$	2,000		
		Donor Brick (S)	2/F	250	\$	1,000		
				Total	Donatio	on Amount:		



#### Pledge/Donation Agreement

This Pledge/Donation Agreement ("Agreement") is made this \_\_\_\_ day of \_\_\_\_\_ between **Chinatown Service Center** (CSC) and **Donor** (as identified in Exhibit A attached).

Donor is the individual or entity that has executed this Agreement, and who is further identified on the Pledge/Donation Form attached hereto as **Exhibit A** (the "Form").

CSC has formed a subcommittee tasked with collecting donations and/or pledges from individuals or entities. Said donations and/or pledges will be used to fund the build out of a Health Center and PACE Center Project located at 726 E. Main Street, Alhambra, CA 91801 USA.

CSC and Donor hereby agree as follows:

- Donor Commitment. The Donor hereby pledges to CSC the sum identified on the Form under Pledge Amount (the "Pledge"), which is designated for the benefit of the Health Center and PACE Center Project.
- Purpose of Pledge. It is understood and agreed that the Pledge will be used for the following purpose or purposes: To fund the costs and expenses incurred for the build out of the Project.
- 3. Intent. It is the agreement of the parties and the intention of the Donor that this contribution and any unpaid Pledge under this Agreement shall constitute the Donor's binding obligation and shall be enforceable at law and equity, including, without limitation, against the Donor and the Donor's estate, heirs and personal representatives, and their successors and assignees. The Donor acknowledges that CSC has substantially relied, and shall continue to rely, on the Donor's Pledge being fully satisfied as set forth herein. The Donor acknowledges that CSC has committed substantial resources toward the Health Center and PACE Center Project in reliance of Donor's Pledge, and CSC will suffer irreparable harm due to any breach of this Agreement or obligations owed by Donor.
- 4. Recognition by CSC. With the Donor's permission, to honor the Donor, and to express appreciation, publicity in the form of social media and news announcements, both internal and external, may be frequently made by CSC. The Donor acknowledges that disclosure of Donor information relative to the Pledge is not required or subject to public records requirements, and CSC shall not be held liable to Donor for such disclosure of information if Donor grants permission. The Donor's name or designated name(s) will be prominently displayed. CSC reserves the right to the design, size, and location of the display. Name will be displayed for a period of minimum of 25 years or specified length on the Pledge Form, commencement from completion date of the build out.
- 5. Additional Contributions. The Donor reserves the right to increase the Pledge through additional contributions and hereby consents to additional contributions to the Pledge by any individual, corporation, foundation, trust, estate or other legal entity through individual contribution, bequest or other contribution vehicle, and all contributions so designated shall be subject to the provisions of this Agreement.
- 6. **Future Changed Circumstances**. If, in the opinion of the Board of Directors of CSC, all or part of this contribution cannot at some time in the future be usefully or practically applied to the above purposes or if the purpose cannot be achieved because of a future

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change in law or unforeseeable circumstances, it may be used for any related purpose which in the opinion of the Board of Directors will most nearly accomplish the Donor's wishes.

- 7. **Amendment**. By mutual written consent of CSC and the Donor, the Donor's legally or duly appointed agent or attorney-in-fact, or the personal representative of the Donor's estate, any provision of this Agreement may be amended, modified, or deleted. Any such changes, deletions or additions shall be recorded in written signed addenda, which shall form part of this Agreement.
- 8. **Morality Clause**. If at any time the Donor or his or her name may compromise the public trust or the reputation of CSC, including acts of moral turpitude, the institution with the approval of the Board of Directors of CSC has the right to remove the name or return the contribution.
- 9. **References**. Any exhibits, riders, addendums, charters, or other documents referenced herein are incorporated into this Agreement.
- 10. Entire Agreement. This Agreement contains the entire understanding of the parties with respect to the subject matter of the Agreement and is subject to the laws of the State of California. CSC and Donor agree to the exclusive jurisdiction and venue of the state courts located in Los Angeles County, California relative to any dispute, proceeding, or claim arising from this Agreement.
- 11. **Disclosures**. CSC is exempt from federal income tax under IRC Section 501(c)(3) as a public charity under IRC 509(a)(2). Donors may be entitled to deduct contributions made to CSC under IRC Section 170. CSC has not provided any goods or services to Donor in consideration for the contribution. CSC is not a tax expert nor certified public accountant, and Donor acknowledges that the disclosures made herein are not for the purposes of tax advice. Donor shall seek independent legal and/or tax advice with respect to the contributions and permitted deductions thereof, if any. Upon Donor's written request to CSC after CSC's confirmation and receipt of your contribution, CSC will provide Donor a Written Acknowledgment evidencing the same.

**IN WITNESS WHEREOF**, CSC and Donor hereby affix their signatures on the day and year written below their signatures:

# | Date: | Date





\_\_\_\_\_ Date: \_\_\_\_\_

## **CSC Health Center & PACE Center**

#### **EXHIBIT A**

### **Pledge/ Donation Form**

1. Donor imormation			
Name:			
Mailing Address:			
Phone:			
Email:			
Name to be Display:			
Location(s):			
2. <u>Pledge Amount:</u> \$	Payable on or bet	fore, 20	
For Pledges Amount of \$10	),000 or more, should you cho	oose to pledge your donation and	contribute over an extended
period of time, please fill or	ut the information below:		
Total Pledge Amount: \$	(amount	) over (years*) in	
which \$	will be contributed to eac	h calendar on or before	of each calendar yea
*(For \$10,000 to \$49,999, T	Three Years Max. For Over \$50	0,000, Five Years Max.)	
3. <u>Checks:</u>			
Please make checks payab	ole to Chinatown Service Cent	er. Checks should be mailed to th	ne following address:
Chinato	wn Service Center		
Attn: Ca	pital Campaign Committee		
711 W. (	College Street #388		
Los Ang	geles, CA 90012		
4. <u>Credit Card:</u>			
□Visa		American Express	Discover
Name on card:			
Card number:			
		Billing Zip code	
5. Stock Donation:			
CSC will contact you shortl	y with an Authorization to Tra	nsfer Ownership form.	
-The stock transfer will tak	e effect within 1 week.	·	
-The value of the stock at t	he time of transfer will be cor	sidered the amount donated.	
-CSC will issue a receipt for	r tax reporting purposes using	g the value at the time of transfer	
·	ny, should be consulted with a		
·	-		

Donor Signature: \_\_\_\_\_