



The Pittsburgh Ophthalmology Society

Physicians Defining Eye Care in Southwestern PA

850 Ridge Avenue, Pittsburgh, PA 15212-6098 Phone (412) 321-5030 Fax (412) 321-5323 pos@acms.org

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As President of the Pittsburgh Ophthalmology Society (POS), I am writing to request support for the upcoming 2022-2023 monthly educational series. The in-person programs provide a unique opportunity for industry representatives to engage with members of the Society in a collegial setting while supporting a quality lecture presented by distinguished guest faculty.

Five monthly meetings are scheduled with opportunities for sponsorship. All meetings are held at the Ohio Ballroom (2nd level of the Rivers Casino), located on the North Side. Attendance is between 50 and 75 physician members. The format for the evening includes lectures, a social hour/visit with exhibitor, and dinner. This year's meetings will be held:

September 8
November 3*
December 1

January 12, 2023
February 9, 2023

*Meeting held at the Babb Bldg (850 Ridge Ave, Pgh PA 15212).

While we cannot allow sponsors to choose specific speakers, we understand that speakers on specific topics may be of more interest to certain sponsors. Visit pghoph.org for a complete list of guest faculty speakers or contact Nadine Popovich, Administrator by email: npopovich@acms.org or phone: 412.321.5030.

Benefits of sponsoring a meeting include: 5 minutes of podium time to address attendees and an invitation for you and a colleague to attend the POS social to engage with members. A complete list of Sponsor benefits can be found on the Sponsor Agreement.

The cost of solely sponsoring a meeting is \$3,000 or you may choose to participate as a co-sponsor at \$1,800. A limit of three companies is permitted to co-sponsor a program. All requests are granted on a first-come, first-served basis. The format for sponsorship of a monthly meeting meets the requirements for exemption from reporting for the Sunshine Act.

To confirm your sponsorship, please complete and return the Monthly Meeting Sponsor Form (attached). Do not hesitate to contact Nadine Popovich, administrator, should you have a question.

Thank you, again, for your support and partnership with the Society. I look forward to welcoming as a sponsor!

Sincerely,

Marshall W. Stafford, MD
President



The Pittsburgh Ophthalmology Society

Physicians Defining Eye Care in Southwestern PA

2022 - 2023 MONTHLY MEETING EXHIBITOR AGREEMENT

This form **MUST** be completed and submitted to secure an Exhibit Table. The signed agreement serves to reserve and purchase an Exhibit Table. Exhibit space will not be granted without a signed agreement. Payment is not due at the time of the Agreement submission.

Attn: Nadine Popovich
The Pittsburgh Ophthalmology Society 850 Ridge Avenue Pittsburgh PA 15212
Website: www.pghoph.org

QUESTIONS: Contact Nadine Popovich Email to npopovich@acms.org Phone: (412) 321-5030 Fax (412) 321-5323

COMPANY NAME

(Please complete as you would like it to appear on signage)

Select One Exhibit (sole Exhibitor/3,000) Co-Exhibit Meeting (up to 3 co-sponsors/\$1,800)

Date of Meeting (select one) September 8, 2022 November 3, 2022 December 1, 2022

January 12, 2023 February 9, 2023

Contact Person

Address

Email

PHONE

Benefits of participation at a Pittsburgh Ophthalmology Society Monthly Meeting include:

- Display Table set up in foyer (1) 6 ft table w/2 chairs
- Access to 50 to 70 Ophthalmologists with opportunity for engagement with physicians prior to start of meeting
- Provided 5 minutes of podium time (at the end of business meeting) to present your company's product to attendees (power point is acceptable).
- Participate in the "Visit with Exhibitor/Networking" session. This 45-minute session provides Exhibitors an opportunity for one-on-one conversations with physicians.
- Company's name on all digital marketing (meeting announcement; POS website; follow-up email to attendees)

Please list Industry Representatives attending:

Name Email Phone

Name Email Phone

PAYMENTS AND TAX ID

The Society's Tax ID# is 25-6064814

Check payable to:

Pittsburgh Ophthalmology Society

Credit Card Payment:

Contact Nadine Popovich to process a credit card payment.

(Email: npopovich@acms.org or Phone: 412.321.5030)

Mail payment to:

Pittsburgh Ophthalmology Society (Attn: Nadine Popovich)
850 Ridge Avenue Pittsburgh PA 15212



POS Monthly Meeting

A G E N D A

Representatives may set up from 3:00 pm on the day of the meeting.

- 4:00 p.m. Registration /Visit with Exhibitors
- 4:30 p.m. Welcome & First Lecture (Exhibitors welcome to attend lecture)
- 5:35 p.m. Case Presentation (Resident and questions /answers by Guest Faculty)
- 5:50 p.m. Business Meeting of the Pittsburgh Ophthalmology Society
Exhibitors will have 5 minutes of podium time after the business portion.
Power Point presentations are acceptable.
- 6:00 p.m. Visit with Exhibitors/Networking Session
- 6:45 p.m. Visit with Exhibitors/Networking concludes, guests seated for dinner
- 7:05 p.m. Second Lecture Begins (Exhibitors welcome to attend lecture)
- 8:05 pm Conclusion of Program

All Meetings are in-person (unless otherwise stated) and are held in the Ohio Ballroom in the Rivers Casino, located on the North Shore.

The private ballroom, located on the 2nd level, is set apart from the casino, with convenient access for attendees.

The November 3 meeting will be held in the [Babb Insurance Building](#)
850 Ridge Ave | Pgh PA | 15212

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.

1 Name (as shown on your income tax return). Name is required on this line; do not leave this line blank.
Pittsburgh Ophthalmology Society

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.

Individual/sole proprietor or single-member LLC

C Corporation

S Corporation

Partnership

Trust/estate

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.

Other (see instructions) ▶ _____

4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):

Exempt payee code (if any) _____

Exemption from FATCA reporting code (if any) _____

(Applies to accounts maintained outside the U.S.)

5 Address (number, street, and apt. or suite no.) See instructions.
850 Ridge Ave

6 City, state, and ZIP code
Pittsburgh PA 15212

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

				-			-				
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or

Employer identification number

2	5	6	0	6	4	8	1	4
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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 ▶ *Nadine Popovich* Date ▶ **June 22, 2022**

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.