



CHEROKEE INDIAN
HOSPITAL FOUNDATION

WWW.CIHFOUNDATION.ORG
CHEROKEE, NORTH CAROLINA

Non-Profit tax Id #80-0351363

I am writing to request your support for the Cherokee Indian Hospital Foundation's 14th Annual Gala Silent Auction. This year's Gala, themed A Mid-Summer Night's Dream, will be held on June 21, 2025, and promises to be an enchanting evening of celebration, community, and giving.

The Foundation's mission is to enhance the well-being of the Eastern Band of Cherokee Indians by strengthening the Cherokee Indian Hospital Authority (CIHA), including the individual clinics, behavioral health facility, and hospital that comprise it. Each year, our Gala serves as the primary funding source for the Foundation, allowing us to expand access to vital health services, support innovative projects, and meet the greatest needs of our community.

We hope you will consider donating an item to be featured in our silent auction. Your generous, tax-deductible contribution will help support the Foundation's efforts to provide transformative healthcare outcomes for the Cherokee people and beyond. We are able to accomplish this by finding new sources of financial help that expand successful Cherokee health services, fund innovative and new projects, assess the greatest needs, and help us meet them. Our aim is to lift CIHA's healthcare services to meet the highest national standards.

By donating an auction item—whether it be a gift certificate, artwork, jewelry, or a unique experience—you have the unique opportunity to make a tangible difference in the lives of the Eastern Band of the Cherokee Indians. Your generosity will not only directly support life-changing initiatives but will also be prominently showcased in our Gala program and featured before an audience of nearly 700 attendees at Harrah's Cherokee Casino, including influential partners and supporters from across North Carolina. This highly anticipated, sold-out event provides an excellent platform to align your brand with a cause that resonates deeply, offering significant marketing exposure and a meaningful connection with those who share your commitment to community well-being.

Your support makes it possible for the Cherokee Indian Hospital Foundation to continue advancing healthcare access and outcomes for the Cherokee community, help to ensure the health and well-being of the next seven generations.

Thank you for considering this opportunity to support our mission. If you have any questions or wish to arrange for your donation, please feel free to contact Brittney Lofthouse, Foundation Director, by calling/texting her at 828.508.3003. or via email at Brittney.lofthouse@cherokeehospital.org.

Thank you,

*Cherokee Indian Hospital
Foundation Board of Directors*

Brittney Lofthouse, Director
Dj Robinson, Chair
Maggie Jackson, Co-Chair
Michele Houston, Treasurer
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Save the Date

The 14th Annual Cherokee Indian Hospital
Foundation Gala Presents a

Midsummer Night's Dream

An Eclectic Black-Tie Event

JUNE 21, 2025 | 6PM TO 10PM

At Harrah's Cherokee Casino Event Center

Formal Invitation to Follow



**CHEROKEE INDIAN
HOSPITAL FOUNDATION**

Auction/ Wine Pull Donation Form

This receipt acknowledges your contribution to the Cherokee Indian Hospital Foundation, a designated 501(c)(3) non-profit organization. You have not been provided any goods or services in exchange for this contribution. Retain this document for proof of this tax-deduction gift. Please contact your tax advisor regarding this matter.

**Cherokee Indian Hospital Foundation
Non-Profit Tax ID #80-0351363**

Please complete the form below and return it with your contribution:

Name of Business/ Donor: _____

Contact Person: _____

Address: _____

Telephone: _____

E-mail: _____

I/ We will support the Cherokee Indian Hospital Foundation by:

Donating a Silent Auction item from your business or organization
Item(s) Donated: _____

• Value: \$ _____

• Please attach/include information about the item and your business for our display.
(Business cards, logo, brochure, photo of craftsman/ donor if available)

Donating to the Wine Pull Event:
of Bottles & Description:

Value of Wine: \$ _____

• Monetary Amount for Purchase of Wine: \$ _____

Monetary Donation: I have enclosed a check made payable to the Cherokee Indian Hospital Foundation for: \$ _____

Monetary Donation: I have made a donation to the Cherokee Indian Hospital Foundation
• VIA CIHF website: \$ _____

For more information about the Cherokee Indian Hospital Foundation and/or the annual Gala, visit www.cihfoundation.org