



AFFORDABLE

HOUSING
YOU. ME. US.

Dear Supporter,

We have an affordable housing crisis that affects all of us. South Florida continues to be the most cost-burdened metro region in the nation, with over half of Broward residents spending more than 30% of their monthly income on housing expenses. More than 44% of Broward County residents represent ALICE (Asset Limited, Income Constrained, Employed) families that earn more than the poverty level but less than the basic cost of living in Broward.

There is a growing recognition of the important link between an adequate affordable housing supply and economic growth. The escalating housing prices are significantly impacting Broward County's working families and households, including their ability to access food and health care, an increase in homelessness, and a lack of economic security and wellbeing.

Earlier this year, the Coordinating Council of Broward published 'Housing Broward: An Inclusive Plan,' a report detailing ideas and strategies vetted by a variety of stakeholders, including developers, residents, advocates, and municipal and business leaders. The plan outlines goals and actions to increase the supply of affordable housing for all Broward residents, such as the creation of a Broward County Affordable Housing Trust Fund. Housing trust funds are distinct funds established by city, county, or state governments that receive ongoing dedicated sources of public funding and leverage private investment to support the preservation and production of affordable housing.

The Charter Review Commission has proposed this Trust Fund as a special referendum issue in the November 2018 General Election, with the purpose of providing a continuing fund for the Broward County Commission to use to create and sustain affordable housing for Broward County renters and homeowners.

To create awareness about the Housing Trust Fund Referendum, the Coordinating Council of Broward County has developed the 'Affordable HoUSing (Affects): You. Me. Us.' Campaign, which aims to eliminate the negative perceptions surrounding affordable housing and engage businesses, municipalities, and voters in the efforts.

We invite you to partner with us as a financial contributor to the campaign. All funds will be used to underwrite the costs of reaching out to a variety of stakeholders to ensure the success and approval of the Housing Trust Fund Referendum. Enclosed you will find a menu of options for your contribution. Please complete the partnership commitment form and send back with your payment made payable to the Coordinating Council of Broward.

Please feel free to contact me with any questions or concerns at (954) 507-7156 or sandra@npobroward.org.

Sincerely,

Sandra Veszi Einhorn
Executive Director
Coordinating Council of Broward



Partnership Levels

Sponsor Benefits/Level	Platinum \$25,000	Gold \$15,000	Silver \$10,000	Bronze \$5,000	Community Supporter \$2,500
Mention in Advertisements (Radio, Print, TV, Digital/Online)	✓				
Exclusive Signage Display at Community Exchange Series	✓	✓			
Logo Prominently Displayed on Campaign web page	✓	✓	✓		
Partner of Community Exchange Series (logo on all event signage)	✓	✓	✓	✓	
Logo placement on partner signage and printed and digital collateral materials	✓	✓	✓	✓	
Listing on Campaign web page	✓	✓	✓	✓	✓
Listing on collateral	✓	✓	✓	✓	✓





Name: _____

Title: _____

Company: _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Fax: _____

Email: _____

Authorized Signature _____

The partnership schedule listed below offers ways you can donate and be an integral part of the 'AFFORDABLE HOUSING (AFFECTS): YOU. ME. US.'

I WOULD LIKE TO PARTNER AS A: (PLEASE CHECK APPROPRIATE BOX)

- Platinum \$25,000
- Gold \$15,000
- Silver \$10,000
- Bronze \$5,000
- Community Supporter \$2,500
- In-Kind Media \$ _____

Please make your check payable to the Coordinating Council of Broward. Submit partnership reservation form and payment to:

The Coordinating Council of Broward
Attn: Sandra Veszi Einhorn
PO Box 4640
Fort Lauderdale, Fl. 33338

I PREFER TO PAY BY CREDIT/DEBIT CARD:

- VISA
- MasterCard
- AMEX
- Discover

Card Number _____

Exp. Date _____ / _____ CVV: _____

Authorized Signature: _____

Date: _____

PLEASE SUBMIT NO LATER THAN OCTOBER 1, 2018