



**FOOD INDUSTRIES SALES MANAGERS' CLUB  
OF LOS ANGELES, INC.**



*is proud to honor*

**WOMEN IN THE  
FOOD INDUSTRY**

**2019 Honorees**



**Cher Cech**  
**Pavilions**  
Grocery Sales  
Manager



**Mickie Sharp-Villanueva**  
**the Performance Group**  
Business Development  
Manager



**Lois Verleur**  
**Olive Crest Homes**  
**for Abused Children**  
Co-Founder

**Tuesday, April 23, 2019**

**11:15 a.m. – Reception ♦ 12:00 p.m. – Lunch**

**Business Attire**

**Los Coyotes Country Club**  
**8888 Los Coyotes Drive, Buena Park, CA 90621**

**Chairperson of the Day**  
Cynthia Weifenbach  
CLW Consulting/PeekImage, LLC./HB Spirits

**Register online at [www.FISMC.org](http://www.FISMC.org) today!**





**WOMEN IN THE FOOD INDUSTRY**  
**Los Coyotes Country Club, Buena Park**  
**TUESDAY, APRIL 23, 2019 - 11:15 am Check-In; 12:00 Lunch**  
**Full Tables of Ten - Members - \$500.00 / Full Tables of Ten - Non-Members - \$750.00**  
**Individual - Member - \$ 50.00 / Individual - Non-Member - \$ 75.00**

1. \_\_\_\_\_  
 Name Primary E-Mail Address Primary Phone Number

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Company Address City Zip  
*(List names and company name as they will appear on badges)*

2. \_\_\_\_\_  
 Name Company

3. \_\_\_\_\_  
 Name Company

4. \_\_\_\_\_  
 Name Company

5. \_\_\_\_\_  
 Name Company

6. \_\_\_\_\_  
 Name Company

7. \_\_\_\_\_  
 Name Company

8. \_\_\_\_\_  
 Name Company

9. \_\_\_\_\_  
 Name Company

10. \_\_\_\_\_  
 Name Company

Reserved Member Table of Ten \_\_\_\_\_ @ \$ 500.00 = \$ \_\_\_\_\_

Reserved Non-Member Table of Ten \_\_\_\_\_ @ \$ 750.00 = \$ \_\_\_\_\_

Reserved Member Individual Tickets \_\_\_\_\_ @ \$ 50.00 = \$ \_\_\_\_\_

Reserved Non-Member Individual Tickets \_\_\_\_\_ @ \$ 75.00 = \$ \_\_\_\_\_

**Total Due:** = \$ \_\_\_\_\_

**Meal Selections:** Chicken \_\_\_\_\_; Mushroom Ravioli \_\_\_\_\_

**Mail check payable to:** Food Industries Sales Managers' Club, PO Box 3602, Orange, CA 92857-0602

**Send reservation forms to:** Cynthia Weifenbach P: (714) 970-2753  Check this box if interested in membership.  
 F: (714) 970-7753 Email: cweifenbach@pacbell.net

**➡ Credit Card Payment option:** **FISMC Tax ID # 956093421**

Card Number: \_\_\_\_\_ Card Type: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Card Holder Name & Company : \_\_\_\_\_ Phone Number: \_\_\_\_\_

Billing Address: \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_ Zip Code: \_\_\_\_\_

Card Holder Email: \_\_\_\_\_ Signature: \_\_\_\_\_

Total Number Attending: \_\_\_\_\_ Total Remittance: \$ \_\_\_\_\_

*Please include this form with payment*  
**R.S.V.P. by Wednesday, April 17, 2019**