

PROMOTIONS AND CREATIVE MANAGEMENT (PCM)
CREATIVE BRIEF FORM (EFORM 1000)

Requestor's Information:

Requestor's Name(*):

Danely Salgado

Unit/Section(*):

Equitable Access Section

Request Date(*):

07/13/2026

Unit/Section Head(*):

Christina Villegas

Email Address(*):

cvillegas@ph.lacounty.gov

Phone(*):

626-299-3571

Project Name(*):

Bilingual Bonus Program Forms FY 26-27

Due Date(*):

07/16/2026

Project Status:

☒ New request ☐ Addendum to existing request

Final File output:

☒ Print ☐ Digital (Format): ☒ pdf ☐ jpg ☐ png ☐ eps ☐ mov ☐ mp4

Type of Communications / Materials:

☐ Promotions / Branding

☐ Video Production

☐ Website

☒ Publications

☐ Public Informational Media

☐ Social Media

Others, please specify:

Target Audience (Select all that apply):

☐ General Public (Adults)

☒ Provider Network (Treatment)

☐ SAPC Leadership

☐ General Public (Youth)

☒ Provider Network (Prevention)

☐ DPH Leadership

☐ Patients (Members)

☐ CENS

☐ AB 109 Participants

☐ SAPC Staff

Others, please specify:

Project Details:

Please provide project details, objectives, mandates (e.g. design inspirations), background, attachments, and other information to consider for your request.

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Please add the Bilingual Bonus forms under the CRLA tab.