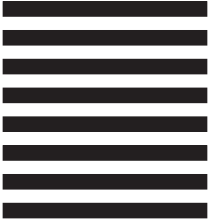




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*We're saving lives*  *And you can help*  
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**SAN ANTONIO COMMUNITY HOSPITAL**



Your new Emergency Department and Patient Tower with all private rooms

*“Thank you so much for considering a gift to your hospital. Friends like you, who want to positively impact people’s lives even in difficult times, are what make our community great.”*

*Harris F. Koenig, President & Chief Executive Officer*

**Please apply this gift to the following:**

- Emergency Department & Patient Tower
- Women’s Breast & Imaging Center
- Neonatal Intensive Care/Sick Baby Fund
- Cardiac Services
- San Antonio Society
- Business Benefactors
- Area of greatest need

**\*Please make this a recurring gift:**

- Monthly
- Bi-annually
- Annually
- Other \_\_\_\_\_

\* Please complete the credit card information below:

- Yes! I want to be a member of the *Living Legacy Society* because San Antonio Hospital Foundation is in my estate plan.
- Please send me information on Charitable Estate Planning options.
- Please contact me about Trust opportunities that can **pay me income for life** and/or reduce my taxes.

*Please Print*

This gift is from \_\_\_\_\_

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**Please acknowledge this gift to:**

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Check here if acknowledgment is not necessary.

All gifts, donations and bequests are tax-deductible under Federal and State tax regulations within the limits of the law. Tax ID# 33-0042666. For more information, please call 909.920.4962 or visit SACH.org.

If you do not wish to receive information about the hospital, healthcare issues, and opportunities to support the hospital, please send an e-mail to [crose@sach.org](mailto:crose@sach.org) or call 909.920.4962.

**Here is a gift of health and life for the people in my community:**

- Check enclosed, payable to San Antonio Hospital Foundation (SAHF)
- Please charge my:  Visa  MC  AMEX

Amount \_\_\_\_\_

Card Holder Name \_\_\_\_\_

Account # \_\_\_\_\_

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San Antonio Community Hospital  
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