



How Can You Say Thank You?

Honor Your Health Care Hero

provides an opportunity for grateful patients and their family and friends to say thank you by making a gift in honor of the physician, nurse or staff member who made a difference in their care.



community-based, not-for-profit

Thanking a HERO is easy!

By making a gift of any amount to John Muir Health Foundation, your caregiver will receive a custom-crafted HERO lapel pin.



You can be thanked in many ways from patients. While not expected, gratitude is a most welcome gift. Receiving this type of acknowledgment has been one of the greatest honors in my life.

—Sally Davis, M.D.



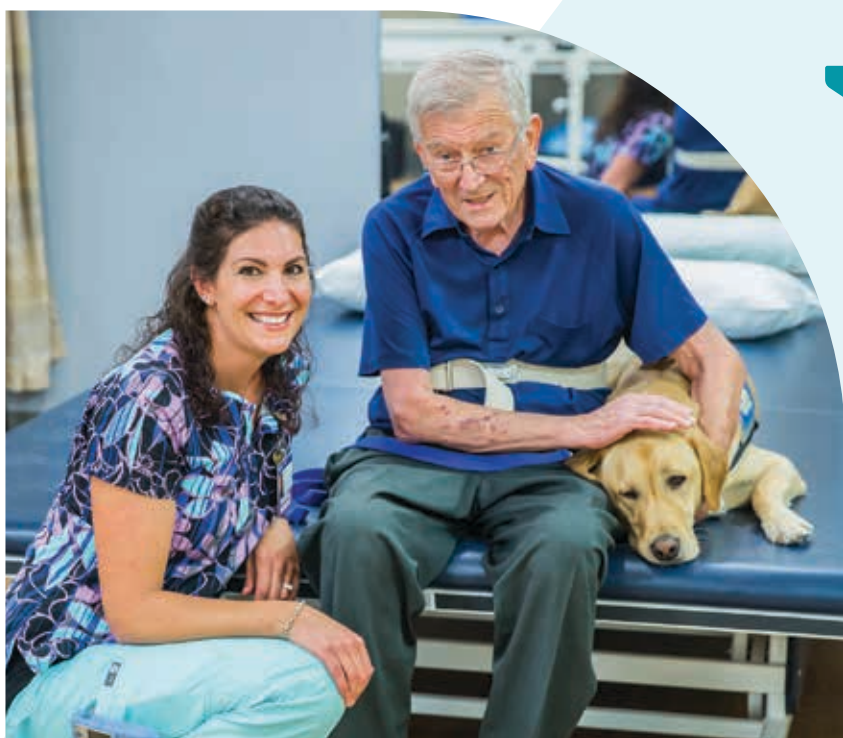
Thanks to the fast actions of Dr. Andrew Dublin and Dr. Perkin Shiu, I am alive and well today. It brought me and my wife great joy to say thank you for saving my life.

—Sundar Vasu Devan



The team at John Muir Health was incredibly responsive and compassionate to my husband ...and to me. I was very worried about Sundar, but they kept me informed every step of the way. I thank John Muir Health every day for saving my husband's life.

—Bama Vasu Devan



**By making
a gift today
you can...**

- Thank** a physician, nurse or staff member
- Honor** someone special or a special occasion
- Support** John Muir Health's quality patient care
- Ensure** the highest level of care
- Save** lives in our community every day

I wish to honor the following caregiver(s):

(Please provide first and last name)

Caregiver's Name: _____

Message _____

Caregiver's Name: _____

Message _____

Donor's Name

Please continue form on the next page...

**Philanthropic gifts
help to sustain and
enhance the margin
of excellence that
distinguishes
John Muir Health
as a top-rated health
care provider and a
vital community asset.**



Your HERO will receive this custom-crafted lapel pin when you say **Thank You!**

Please provide the following information:

Donor's Name: _____

Address: _____

City: _____ State: _____ Zip code: _____

Email: _____

Cell Phone: (_____) _____ - _____ Home Phone: (_____) _____ - _____

Enclosed is my gift of:

\$50 \$100 \$500 \$1,000 Other \$ _____

Check enclosed payable to John Muir Health Foundation

Please charge my: Visa MasterCard Amex Discover

Cardholder's Name: _____

Card Number: _____ / _____ / _____ / _____

Exp Date: _____ / _____ / _____ CVV: _____

Address of Cardholder: _____
(If different than above)

City: _____ State: _____ Zip code: _____

Signature: _____

You may wish to designate your gift to one or more of the following service areas:

- | | |
|--|---|
| <input type="radio"/> The John Muir Health Fund (General Support) | <input type="radio"/> Neurosciences Services |
| <input type="radio"/> Behavioral Health Services | <input type="radio"/> Nursing Education |
| <input type="radio"/> Cancer Services | <input type="radio"/> Orthopedic Services |
| <input type="radio"/> Cardiovascular Services | <input type="radio"/> Physical Rehabilitation |
| <input type="radio"/> Children's Services | <input type="radio"/> Spiritual Support |
| <input type="radio"/> Community Support/Emergency Fund | <input type="radio"/> Trauma Services |
| <input type="radio"/> Diabetes Services | <input type="radio"/> Women's Health Services |
| <input type="radio"/> Emergency Services | |

John Muir Health Foundation is dedicated to inspiring and stewarding philanthropic support for all programs, services, and facilities of John Muir Health.



All gifts are tax-deductible, as allowed by law. Tax ID # 94-2650855
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