



December 2006

Dear Mr. and Mrs. Smith,

As a fellow donor, emergency room physician of 33 years, and Tri-City Hospital Foundation Board member I'd like to take a moment to wish each of you a healthy and happy holiday season. Also, I wish to thank you for your past generous support of the work being done here at Tri-City Medical Center.

As a community hospital, Tri-City Medical Center often plays a critical role in the most significant events of people's lives—from the joyous birth of a child, to life-saving emergency surgeries, or even the final illness of a loved one. We recognize the importance of providing the highest quality and most compassionate care possible to our patients. We strive to always treat healthcare as a sacred trust and each patient as a unique human being.

In keeping with our standard of excellence, Tri-City Medical Center is also constantly working to ensure that we remain on the cutting edge of medical technology. Technologies today assist in making procedures safer, allowing patients to return home more quickly. But progress comes with a price tag. Tri-City Medical Center relies on the philanthropic support of our community to assist in offsetting these rising costs.

Gifts both large and small have made a difference in the lives of the thousands of patients who visit Tri-City each year. Would you consider making a year-end gift to Tri-City Hospital Foundation today to assist us in supporting the vital work of Tri-City Medical Center? Your tax deductible gift of \$50, \$100, \$250, or even more will help to ensure that we can continue to provide the best possible medical care, right here, right where you need it.

I urge you to make the most generous gift you can today, and as always, we'll be very appreciative of any amount you are able to give.

Sincerely,

Dr. Neil Joebchen
President, Board of Trustees
Tri-City Emergency Room Physician

4002 Vista Way • Oceanside, CA 92056-4506 • Tel: 760.940.3370 • Fax: 760.940.4053 • www.tricityhospitalfoundation.org

Please detach and enclose this form with your gift in the envelope provided for your convenience. Thank you for your support!

Yes! I want to support quality healthcare for my family at Tri-City Medical Center.

Enclosed is my gift of: \$50 \$100 \$250 Other _____ My check is enclosed. Please make check payable to TCHF.
 Please charge my gift to: MC Visa AmEx Discover

CARD NUMBER _____ EXPIRATION DATE _____
SIGNATURE _____ () _____
EMAIL _____ PHONE NUMBER _____



4002 Vista Way
Oceanside, CA 92056
Telephone: (760) 940-3370
Fax: (760) 940-4053
www.tricityhospitalfoundation.org

YED06L02