



San Antonio Hospital Foundation My Commitment to the Building 1100 Campaign

Company _____

Name(s) _____

Phone _____

E-mail _____

Address _____

City _____ State _____ Zip _____

I/We pledge \$ _____ toward enhancing cancer care at San Antonio Regional Hospital. I/We plan to pay this pledge in the following manner*:

1st Payment Date _____ / _____ / _____

Over a 1-year 2-year 3-year* 5-year period*

Signature _____ Date _____

Pay by Check Credit Card Personal Business
 Monthly Quarterly Semi-Annually Annually

Name on Card _____

Card Number _____

Exp. Date (month/year) _____ CW# _____

Signature _____ Date _____

Notes _____

Appreciated Stock Gift:

Contact the Foundation Office for more information.

*** Pledges of \$100,000 or more may be paid over a 3- to 5-year period.**

See reverse side for Naming Opportunities.



SAN ANTONIO HOSPITAL FOUNDATION

999 San Bernardino Road, Upland, California 91786 | 909.920.4962
Tax ID 33-0042666

SARH.org

Building 1100 Campaign Naming Opportunities

(as of 3/15/18)

Building **\$3.5 million**

Major

<input type="checkbox"/> Women's Breast and Imaging Center (WBIC)	\$500,000
<input type="checkbox"/> Outpatient Services	\$500,000
<input type="checkbox"/> Main Entrance Lobby - First Floor	\$250,000
<input type="checkbox"/> PET/CT Scan	\$250,000
<input type="checkbox"/> CT Scan (Future)	TBD
<input type="checkbox"/> WBIC Exam Area	\$200,000
<input type="checkbox"/> Outpatient Services Waiting Room	\$150,000
<input type="checkbox"/> Community Room	\$100,000
Lobby - Second Floor	RESERVED
<input type="checkbox"/> WBIC Waiting Room	\$100,000

Intermediate

<input type="checkbox"/> Mammo Rooms (2)	\$75,000
<input type="checkbox"/> General Waiting Reception	\$75,000
<input type="checkbox"/> WBIC Reception	\$50,000
<input type="checkbox"/> WBIC Dressing Lounge	\$50,000
<input type="checkbox"/> Staff Lounge	\$50,000
<input type="checkbox"/> Stereotactic/Biopsy Room	\$50,000
<input type="checkbox"/> Boutique	\$50,000
<input type="checkbox"/> Radiology Rooms (3)	\$35,000
<input type="checkbox"/> Radiology/Fluoroscopy (RF) Room	\$35,000
<input type="checkbox"/> Lab Staging/Observation Area	\$35,000
<input type="checkbox"/> WBIC Ultrasound Rooms (2)	\$35,000
<input type="checkbox"/> Outpatient Services Ultrasound Rooms (2)	\$35,000
<input type="checkbox"/> EKG Room	\$25,000
<input type="checkbox"/> WBIC Radiology Reading Room	\$25,000
<input type="checkbox"/> Outpatient Services Radiology Reading Room	\$25,000
<input type="checkbox"/> Bone Density Room	\$25,000
Wig Room	RESERVED
<input type="checkbox"/> Injection Rooms	\$25,000
<input type="checkbox"/> Exam Rooms (5)	\$25,000
<input type="checkbox"/> Nurse Navigator Office	\$25,000
<input type="checkbox"/> Coffee Cart	\$25,000
<input type="checkbox"/> Men's/Women's Changing Rooms - Dressing Lounge	\$25,000
<input type="checkbox"/> Lobby Kiosks - Portable (2-4)	\$20,000
<input type="checkbox"/> Q/A Coordinator Office	\$20,000
<input type="checkbox"/> Misc. Rooms/Offices (Hot Spot, Consult, Draw)	\$10,000 - \$15,000

Other Namings

<input type="checkbox"/> Donor Wall	\$50,000
<input type="checkbox"/> Donor Wall Inscription	\$500, \$1,000, \$2,500, \$5,000

Funds

<input type="checkbox"/> Cancer Treatment Fund	Endowment
<input type="checkbox"/> Cancer Center Equipment Fund	Endowment
<input type="checkbox"/> Annual Giving Fund for Cancer Center	

Outdoor Features

<input type="checkbox"/> Pedestrian Bridge	\$1.5. million
<input type="checkbox"/> Garden Area	\$20,000 - \$30,000 (each)
<input type="checkbox"/> Benches	\$5,000 - \$10,000 (each)