



*Sun Health Foundation has championed the spirit of philanthropy to provide superior health care to the Northwest Valley of the Phoenix metropolitan area for nearly 50 years.*

*Defined by an extensive history of caring and community collaboration, Sun Health Foundation proudly supports the missions of the following leading health care facilities in the region: Banner Sun Health Research Institute, Banner Boswell Medical Center and Banner Del E. Webb Medical Center.*

*Sun Health Foundation also supports its nationally recognized senior living communities and programs, including the Sun Health Center for Health & Wellbeing, Grandview Terrace, La Loma Village and The Colonnade. With your support, Sun Health Foundation will continue to further its vision to provide every opportunity to live long by living healthy.*



*Sun Health Foundation created the Circle of Care program so that you can express your appreciation in a tangible way.*



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Email: [info@sunhealthfoundation.org](mailto:info@sunhealthfoundation.org)  
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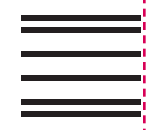
**Circle of Care**  
*Make a gift to honor someone who makes a difference*



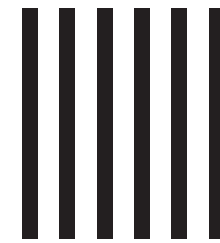
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PO BOX 6030  
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## The Heart Behind the Mission

At Sun Health Foundation we often hear the heartfelt testimonies about the exceptional care a patient or community member received at one of the facilities we support, including Banner Boswell Medical Center, Banner Del E. Webb Medical Center and Banner Sun Health Research Institute. This is because the physicians, nurses, volunteers and staff members that make up these highly skilled teams do their best each day to serve with a spirit of compassion, exemplifying the heart behind the mission of Sun Health Foundation.

Today's health care system truly is a Circle of Care. Each department is integral to your wellness, and each department contributes to creating an exceptional patient experience for you and your loved ones. This exceptional care is made possible through the coordinated effort and dedication of staff members throughout the hospital.

Compassion makes the difference in your health care experience. This is why Sun Health Foundation created the Circle of Care program, so that grateful patients and community members can express their appreciation in a tangible way.



For more information contact: 623-832-5330  
or visit [www.sunhealthfoundation.org](http://www.sunhealthfoundation.org)

## An Opportunity to say "Thank You"

The Circle of Care program at Sun Health Foundation provides you with the opportunity to say "thank you" to staff members and volunteers who were there when you needed them the most. You may have encountered a staff member who was extremely responsive to your needs. Maybe there was an extra act of kindness that brought an increased level of comfort to you or your family. Perhaps it was a life-saving procedure or a visit from a volunteer that made your stay exceptional.

## Recognizing Excellence

When you honor someone through your tax-deductible contribution, they will be informed of your generous gift. Additionally, they will receive recognition in the form of a Circle of Care lapel pin and a celebration within their department to recognize your thoughtfulness.

## Make a Gift and a Difference Today

Your gift to Sun Health Foundation is a direct investment in the health and wellness of your family, friends and our entire community. Making a gift to honor a hospital staff member or volunteer continues the Circle of Care by providing additional funds for use at the facility where you received exceptional care.

## Yes! I am making a gift to honor:

Staff Name \_\_\_\_\_

Unit/Department \_\_\_\_\_

Facility

- BANNER BOSWELL MEDICAL CENTER**
- BANNER DEL E. WEBB MEDICAL CENTER**
- BANNER SUN HEALTH RESEARCH INSTITUTE**

*\*Feel free to include a brief note about the exceptional care you received.*

Your Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

Email \_\_\_\_\_

### Enclosed is my contribution for:

- \$25**    **\$50**    **\$100**    **\$250**    **\$500**
- Other:** \_\_\_\_\_

Please make checks payable to Sun Health Foundation

### Please charge my:

- Visa**    **MasterCard**    **AMEX**

Name on Card \_\_\_\_\_

Card# \_\_\_\_\_

Exp Date \_\_\_\_\_ Security Code \_\_\_\_\_

Signature \_\_\_\_\_

How did you hear about this program?  
\_\_\_\_\_

*Thank you, please insert your gift here*