

Dear Mr. Clark,

I would like to personally thank you for choosing Pocono Medical Center for your healthcare needs. You can be confident that you made the best choice. We are proud of the quality of our programs and services and are committed to offering the highest level of primary and specialty care available to you and your family now and for generations to come.

At Pocono Medical Center the communities we serve are at the center of all we do. **In service to those communities, we are committed to assuring that world-class health care is always available here, close to home. We aspire to continue to build healthier communities now and into the future. We will accomplish these goals with integrity, respect and teamwork – with the communities we serve, our partners and you, the people who entrust us with their health and well-being.**

That is why today, I am asking you to consider making a personal gift to Pocono Health Foundation to support our health care programs and services. You can make your gift to support our new “1915 Fund” established to recognize PMC’s upcoming 100th anniversary in 2015 or to one of the other options listed on the donor card below. An unrestricted gift to the “1915 Fund” will provide support to those areas of patient care with the greatest need.

We sincerely thank you for your loyalty to Pocono Medical Center and your consideration of our appeal. With your contribution you can join others whose collaboration has resulted in so many advances and accomplishments that benefit our community including:

- Pocono Medical Center opened the expanded state-of-the-art Dale and Frances Hughes Cancer Center to assure that our region has access to the most technologically advanced cancer therapy and treatment options available, and to successfully address Monroe County’s leading cause of death.
- In response to the increasing rates of obesity and diabetes in our region, Pocono Medical Center added gastric sleeve surgery to its range of bariatric treatment options, offering people a broader range of choices as they prepare for new, healthier lives.
- Our surgeons now offer minimally invasive aortic valve replacement to dramatically improve recovery times, decrease post-surgical complications and improve the lives of more fragile individuals who otherwise would not qualify for treatment.
- Since its inception, Pocono Medical Center’s robotic surgical program has brought enhanced precision, safety and improved outcomes to hundreds of patients, especially in treatment of cancers.
- Contributions have helped us sustain a range of highly specialized services and programs such as minimally invasive surgery, urogynecology and our recently re-accredited Level III Trauma Center, all unduplicated in our region.

Your gift will help assure that our region will continue to have a comprehensive and advanced range of health care services that are always accessible and that help us reach our goal of building a healthier, thriving and successful place to call home. **I hope that you will consider joining us by making a donation today.**

Sincerely,



Jonathan A. Goldner, DO, FCCP, FCCM
Chief Medical Executive, Medicine & Chronic Disease

Yes. I would like to support quality health care at Pocono Medical Center.

Please direct my gift to:

1915 Fund at PMC Other _____

Here’s my gift:

\$35 \$50 \$75 \$100 Other \$ _____

In Honor Memory of: _____

Please enclose the address of the person(s) you wish to notify of your gift.

Please mail your check and this form in the envelope provided to: The Foundation for Pocono Medical Center.

You can also make your gift by visiting our secure online giving website at:

<http://www.poconohealthsystem.org/>

See reverse side to provide credit card information. Your gift is tax deductible to the extent allowed by law.



Jonathan A. Goldner, DO, FCCP, FCCM
Chief Medical Executive, Medicine & Chronic Disease

**Continuing
an important
conversation with
you, our valued
patient.**

Thank you!



The Healing Garden at the Dale and Frances Hughes Cancer Center

Thank you for your generous support!

Yes. My/my spouse's employer *matches* my charitable giving.
 Employer: _____

Please charge my gift to: Visa Mastercard Discover AMEX
 Card # _____ Exp. _____ SEC Code: _____
 Name on Card: _____
 Signature as it appears on your card _____

Please, check here if you wish to have your name removed from future fundraising requests.

POCONO HEALTH FOUNDATION
 an affiliate of Pocono Medical Center

Pocono Health Foundation is included in my estate plans.
 Please contact me about including **Pocono Health Foundation** in my estate plans.

Phone: _____
 Email: _____



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