



ANCO

Educating and Empowering the
Northern California Cancer Community

August 1, 2025

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4225 Solano Ave, #764
Napa, California
94558

415-472-3960
courtney@anco.org
director@anco.org

RE: ANCO's Corporate Membership 2026

The *Association of Northern California Oncologists* (ANCO) would like to invite your company to renew your ANCO Corporate Membership for 2026. We believe your organization shares ANCO's commitment to quality cancer care. Your Corporate Membership directly strengthens our ability to support physicians, nurses, practice managers, and individuals living with cancer through advocacy, education, and information dissemination. Renewing your membership at the highest level will help us sustain these vital activities and ensure ANCO's continued impact on the future of cancer care.

ANCO's goal is to help hematologists/oncologists deliver the highest quality care to people living with cancer. ANCO's clearly defined **objectives** are:

- To **serve as an advocate** for its members before state, regional, and national organizations (i.e., government, corporate, and private).
- To **play an active role in the reimbursement environment** on behalf of physicians, nurse and practice managers, and people living with cancer.
- To **provide clinical education** to physicians and nurses **and professional education** to physicians, and nurse and practice managers.
- To **disseminate the latest and best information** impacting hematology/oncology practice to its members.

We've enclosed details of ANCO's 2026 Corporate Membership Program, outlining benefits and listing current members. Your membership is crucial to ANCO's ability to support the hematology/oncology community and sustain our vital services.

Highlights of ANCO's 2026 Corporate Membership program include:

- Corporate members at our top two levels receive exhibit space at some of ANCO's most highly regarded conferences and early access to reserve exhibit space.



ANCO

Educating and Empowering the
Northern California Cancer Community

- Corporate members at the Gold-level and above may discount display fees by 10% for ANCO's *Highlights* meetings when applied for and paid with their 2026 Corporate Membership dues.
- All corporate members receive a 20% discount off non-member rates for exhibit fees and industry meeting registrations.
- Access for a selected number of corporate members to ANCO's website depending on the level of your membership.

We understand that the funding mechanism at your organization may require additional documentation to become an ANCO Corporate Member (and provide additional meeting support). If so, **please do not hesitate to contact us with details or to discuss the appropriate processes to follow within your organization to join ANCO as a Corporate Member for 2026.** In the meantime, and for your information, ANCO's FEIN is 68-0213997. Please make your check payable to the ANCO and mail your check to 4225 Solano Avenue, #764, Napa, CA 94558.

Thank you in advance for your anticipated continuing support of ANCO.

Cordially,

Ashley
ANCO Member Relations Manager

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CORPORATE MEMBERSHIP APPLICATION

Annual Dues:

January 1, 2026 – December 31, 2026

Sustaining Plus Corporate Membership	\$40,000
Sustaining Corporate Membership	\$25,000
Diamond Corporate Membership	\$15,000
Gold Corporate Membership	\$10,000
Silver Corporate Membership	\$5,000

COMPANY INFORMATION

Company Name: _____

Mailing Address: _____

Telephone: _____

Main Contact: _____ Email Address: _____

Second Contact: _____ Email Address: _____

MEMBERSHIP LEVELS *(Select one membership level)*

Sustaining Plus Corporate Membership
(\$40,000 per year)

Gold Level Corporate Membership
(\$10,000 per year)

Sustaining Corporate Membership
(\$25,000 per year)

Silver Level Corporate Membership
(\$5,000 per year)

Diamond Level Corporate Membership
(\$15,000 per year)

DISCOUNTED DISPLAY OPPORTUNITIES

(Available at the Gold level and above only)

For ANCO's ASCO Highlights, if display fees are paid at the time of membership renewal:
\$3,150 (per meeting) for an exhibit space with two exhibitor badges or \$6,750 (per meeting)
for two meeting registrations and an exhibit space with two exhibitor badges.

ANCO's ASCO Highlights:

Major Supporter (\$6,750)

Supporter (\$3,150)

PAYMENT INFORMATION

Name: _____

Membership Fee: _____ ANCO's ASCO Highlights Discounted Exhibit Fee: _____

TOTAL AMOUNT: _____ Credit Card* ACH or Check

*there will be a 3.08% fee added if paying by credit card



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Northern California Cancer Community

2026 CORPORATE MEMBERSHIP PROGRAM

2026 BENEFITS	SUSTAINING PLUS \$40,000*	SUSTAINING \$25,000*	DIAMOND \$15,000	GOLD \$10,000	SILVER \$5,000
High level recognition, a standard exhibit table**, and one non-sales industry registration at two meetings: Clinical Cancer Update, Multidisciplinary Management of Cancers, or Hematologic Malignancies Update. (Benefit not guaranteed if application is received after October 1, 2025)	✓	–	–	–	–
Priority meeting space	✓	–	–	–	–
Join one ANCO Committee Meeting of your choice annually	✓	–	–	–	–
Annual Legislative Briefing (held virtually)	✓	–	–	–	–
Two meeting registrations and a standard exhibit table** at two meetings: ANCO's ASCO Highlights, Improving Cancer Care for Californians (odd numbered years only), or Precision Oncology Symposium (even numbered years only). (Benefit not guaranteed if application is received after October 1, 2025)	✓	✓	–	–	–
Meet one-on-one with the ANCO Board of Directors annually	✓	✓	–	–	–
One social media post per quarter with your content (four total)	✓	✓	–	–	–
Opportunity to contribute information to <i>The ANCO Report</i> , i.e. new product announcements, new indications, meeting announcements	✓	✓	✓	–	–
Annual Meet and Greet with the Board of Directors	✓	✓	✓	–	–
Discounted display opportunities at ANCO's Highlights meetings	✓	✓	✓	✓	–
Active links on www.anco.org	✓	✓	✓	✓	–
Receive a post-event list of attendees upon request	✓	✓	✓	✓	–
20% discounted rate off non-member rates for exhibit fee and industry meeting registrations	✓	✓	✓	✓	✓
Recognition on www.anco.org and in the Corporate Member Directory	✓	✓	✓	✓	✓
Receipt of <i>The ANCO Report</i> via e-mail	✓	✓	✓	✓	✓
Distribute Corporate Member meeting information to ANCO membership	✓	✓	✓	✓	✓
Invitations to ANCO clinical and professional education meetings	✓	✓	✓	✓	✓
Display opportunities at ANCO meetings for an additional display fee	✓	✓	✓	✓	✓
Opportunity to send e-blasts to ANCO Members at a rate of \$1,500 per blast	✓	✓	✓	✓	✓
Access to ANCO's website for selected number of corporate members	12	10	8	4	2
Opportunity to contribute to Oncology News and Updates on ANCO.org	✓	✓	✓	✓	✓

*The number of Sustaining Plus and Sustaining Corporate Members will be limited and subject to approval by the board.

**Exhibit Space includes 2 exhibitor badges.

Please contact Ashley Knies, Member Relations Manager at Ashley@anco.org if you have any questions.

Request for Taxpayer Identification Number and Certification

Go to www.irs.gov/FormW9 for instructions and the latest information.

**Give form to the
 requester. Do not
 send to the IRS.**

Before you begin. For guidance related to the purpose of Form W-9, see *Purpose of Form*, below.

Print or type. See <i>Specific Instructions</i> on page 3.	1 Name of entity/individual. An entry is required. (For a sole proprietor or disregarded entity, enter the owner's name on line 1, and enter the business/disregarded entity's name on line 2.)	
	Association of Northern California Oncologists	
	2 Business name/disregarded entity name, if different from above.	
	3a Check the appropriate box for federal tax classification of the entity/individual whose name is entered on line 1. Check only one of the following seven boxes.	
	<input type="checkbox"/> Individual/sole proprietor <input checked="" type="checkbox"/> C corporation <input type="checkbox"/> S corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Trust/estate <input type="checkbox"/> LLC. Enter the tax classification (C = C corporation, S = S corporation, P = Partnership) _____ Note: Check the "LLC" box above and, in the entry space, enter the appropriate code (C, S, or P) for the tax classification of the LLC, unless it is a disregarded entity. A disregarded entity should instead check the appropriate box for the tax classification of its owner. <input type="checkbox"/> Other (see instructions) _____	
	4 Exemptions (codes apply only to certain entities, not individuals; see instructions on page 3):	
	Exempt payee code (if any) _____ Exemption from Foreign Account Tax Compliance Act (FATCA) reporting code (if any) _____ <i>(Applies to accounts maintained outside the United States.)</i>	
3b If on line 3a you checked "Partnership" or "Trust/estate," or checked "LLC" and entered "P" as its tax classification, and you are providing this form to a partnership, trust, or estate in which you have an ownership interest, check this box if you have any foreign partners, owners, or beneficiaries. See instructions <input type="checkbox"/>		
5 Address (number, street, and apt. or suite no.). See instructions.		
4225 Solano Ave, PMB 764		
6 City, state, and ZIP code		
Napa, CA 94558		
7 List account number(s) here (optional)		
Requester's name and address (optional)		

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on line 1 to avoid backup withholding. For individuals, this is generally your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the instructions for Part I, later. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN*, later.

Social security number									
or									
Employer identification number									
6	8	-	0	2	1	3	9	9	7

Note: If the account is in more than one name, see the instructions for line 1. See also *What Name and Number To Give the Requester* for guidelines on whose number to enter.

Part II Certification

Under penalties of perjury, I certify that:

1. The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me); and
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding; and
3. I am a U.S. citizen or other U.S. person (defined below); and
4. The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and, generally, payments other than interest and dividends, you are not required to sign the certification, but you must provide your correct TIN. See the instructions for Part II, later.

Sign Here	Signature of U.S. person <i>Ashley Knies</i>	Date August 1, 2025
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General Instructions

Section references are to the Internal Revenue Code unless otherwise noted.

Future developments. For the latest information about developments related to Form W-9 and its instructions, such as legislation enacted after they were published, go to www.irs.gov/FormW9.

What's New

Line 3a has been modified to clarify how a disregarded entity completes this line. An LLC that is a disregarded entity should check the appropriate box for the tax classification of its owner. Otherwise, it should check the "LLC" box and enter its appropriate tax classification.

New line 3b has been added to this form. A flow-through entity is required to complete this line to indicate that it has direct or indirect foreign partners, owners, or beneficiaries when it provides the Form W-9 to another flow-through entity in which it has an ownership interest. This change is intended to provide a flow-through entity with information regarding the status of its indirect foreign partners, owners, or beneficiaries, so that it can satisfy any applicable reporting requirements. For example, a partnership that has any indirect foreign partners may be required to complete Schedules K-2 and K-3. See the Partnership Instructions for Schedules K-2 and K-3 (Form 1065).

Purpose of Form

An individual or entity (Form W-9 requester) who is required to file an information return with the IRS is giving you this form because they