

Ascension St. Vincent Evansville Foundation FY21 - ASSOCIATE
People Helping People. Be the FACE of Giving.



Name:

Associate ID#: **Phone #:**

Home Address:

State: **Zip Code:**

Work Email:

PLEASE CHOOSE A PAYMENT METHOD:

EASY PAYROLL DEDUCTION

I would like to contribute the following amount each pay period:

\$50 \$25 \$10 \$5

\$ per pay (pays) = \$

There are 26 pay periods per year.

ONE-TIME GIFT **MONTHLY GIFT**

\$500 \$250 \$100 \$50 OTHER \$

Cash *(Enclosed)*

Check *(Enclosed)*

Please make checks payable to Ascension St Vincent Evansville Foundation.

Credit Card

Payroll Deductions begin October 9, 2020, and require a \$5 minimum per pay.

Please check here if you are choosing to payroll deduct. Payroll deductions will continue for 52 pay periods unless you insert a different amount above.

Credit Card Gifts - Select a **ONE** time or **MONTHLY** scheduled gift charged to your credit card on the 15th of each month. There is a minimum \$10 donation per month to setup monthly payments. You may select when you would like payments to end.

**For the security of our associates, please make credit card donations online at
give.stvincentevansville.org/FACE-FY21**

I WOULD LIKE TO SUPPORT:

Please allocate your gift by choosing ONE of the following LOCAL funds:

- Associate Financial Assistance** supports all associates and contingent workers by providing hardship help by paying for household and other daily expenses.
- Cancer Care/Oncology Services** aids cancer patients, programs, and services.
- Nursing Education for Excellence** funds ongoing education, training, certifications, and recertification for our nurses.
- OB/GYN Women's Services** assists the growth related needs of these departments and their services.
- Pediatrics/Peyton Manning Hospital** supports children's inpatient and outpatient programs and services.
- Rebekah Lynne Shinabarger Memorial Nursing Scholarship** sustains this scholarship endowment to benefit future nurses.
- Unrestricted** assists with the priority needs of Ascension St. Vincent Evansville Foundation.

SIGNATURE REQUIRED:

I have checked and approved my donation selection.

I would like to keep my gift anonymous.

Signature: _____ Date: _____

Ways to Return Donation Form:

Form may be returned by interoffice mail to the Foundation, emailed to lori.lofton@ascension.org, faxed to 812-485-7716, or mailed to Ascension St. Vincent Evansville Foundation at 3700 Washington Avenue, Evansville, IN 47750.

Campaign Deadline is 9/4/2020. Gifts will be given out to anyone who donates \$5 per pay period (\$130 total minimum) and above.

Weekly prize drawings will also occur throughout the campaign for all participating donors, regardless of donation level.

Call 812-485-4730 with any questions.