The Colleague Giving Campaign is an opportunity for you to support your passion for our healing mission with a gift to benefit our patients, co-workers, and community.

You have the power to make a difference!

2019 BENEFICIARY PROJECTS:

**Legacy Fund**
Honor our history and sacred healing work founded by the Sisters of the Holy Cross. Funding will support projects and programs that fulfill our mission.

**Early Learning Center**
Enhancing early childhood education at Saint Alphonsus.

**Supporting Each Other**
Building on the current colleague resiliency program by adding services to combat stress, fear and fatigue.

HOW TO GIVE
Complete the form on the back of this page or visit SaintAlphonsus.org/giving-campaign. Select your donation amount and designate where you want your gift to go.

Every gift makes a difference
Your tax-deductible donation is critical in ensuring these programs continue.

CONTACT US
The Foundation would love to talk to you about the campaign, your donation or what we do.

Call: Debbie at ext. 73997 or Nancee at ext. 75659
Email: amber.murray@saintalphonsus.org
Online: SaintAlphonsus.org/giving-campaign

Visit our website for all the FAQs and to learn more about this year’s beneficiaries and our non-profit status.

Those who participate are eligible for prizes including:
• Starbucks gift cards
• Subway gift cards
• Our grand prize - an Electra bike donated by Idaho Mountain Touring

SaintAlphonsus.org/giving-campaign
SELECT A DONATION OPTION:

Donors of $15 gifts or more will receive a 2019 campaign cup and free refills in the cafeteria during the campaign. Deductions will begin in July and run through June 2020.

A. I authorize Saint Alphonsus to deduct the following amount:
   - [ ] Legacy Gift - Honoring our history with a pledge of $1,250 ($48.08 per pay period)
   - [ ] $25 per pay period
   - [ ] $10 per pay period
   - [ ] $5 per pay period
   - [ ] Other: $_______________ per pay period

B. I authorize a one-time payroll deduction of $_____________

C. My gift is enclosed in the amount of $_____________
   - [ ] Cash
   - [ ] Check made payable to Saint Alphonsus Foundation
   - [ ] Credit Card: card number: __________________________
     Security Code:_____________ Exp. Date: _____________

D. [ ] I'd like to donate PTO in the amount of _______ hours per quarter or a one-time donation of _______ hours.
   (Note: Only non-managers and non-Trinity colleagues are eligible to donate PTO. Quarterly deductions will begin in December. I understand that all the applicable payroll taxes (Medicare, Social Security, Federal and State withholding) will be withheld from my PTO deduction gift.

E. [ ] Please renew and extend my existing Colleague Giving Campaign gift for 2019.

DESIGNATE YOUR GIFT

If no designation is selected, your donation will go towards the hospital's greatest need.

- [ ] Legacy Fund
  Honor our history and sacred healing work founded by the Sisters of the Holy Cross. Funding will support projects and programs that fulfill our mission.

- [ ] Early Learning Center
  Enhancing early childhood education at Saint Alphonsus.

- [ ] Supporting Each Other
  Building on the current colleague resiliency program by adding services to combat stress, fear and fatigue.

More information on these funds is available on our website: SaintAlphonsus.org/giving-campaign

Signature
Date

Thank you for your support! Your donation is tax deductible. An acknowledgement letter will be sent to you at the end of the year. Please return your completed form to the Saint Alphonsus Foundation office in the interoffice mail or email to amber.murray@saintalphonsus.org