



St. Vincent
Foundation

8402 Harcourt Road, Ste. 210
Indianapolis, IN 46260

Name: _____ Nickname: _____
First Last Title
Home Address: _____
City, State, Zip: _____
Associate ID #: _____ Facility/Cost Center #: _____
See back of name badge
Phone: _____ Email: _____
Name(s) to appear in donor listings as: _____

2010 Associates Campaign • April 15-June 15 • give.stvincent.org

1. My contribution to the St. Vincent Foundation is \$_____ to benefit (check one below):

- ☐ St. Vincent Carmel (check one) ☐ Associates Memorial Art Fund ☐ HUGS Program ☐ Associate Education Fund
☐ St. Vincent Health Joshua Max Simon Primary Care Center Expansion Project
☐ St. Vincent Heart Center Team Member Education Fund
☐ St. Vincent Indianapolis Equine Assisted Therapy Program
☐ Seton Specialty Hospital Associates Education Fund
☐ Weekend to End Breast Cancer, Participant Name _____ ID# _____
☐ Greatest Needs of St. Vincent
☐ Other St. Vincent Foundation program _____

2. My total contribution \$_____.

- ☐ This is a **one time contribution**.
☐ Check (make payable to St. Vincent Foundation)
☐ Credit Card (MC, VISA, AmEx, Discover)
Name as listed on card: _____
Credit Card #: _____ Exp Date: _____
Signature: _____
☐ This is a **pledge** of \$_____ to be paid through payroll deductions of \$_____/pay period over _____ pay periods.
(minimum of \$1.00/pay period) (Note that there are 26 pays/year)
Signature for payroll authorization _____
☐ This is a **contribution** of PTO (paid time off). Number of hours contributing _____
(Taxes will be taken from the cash equivalent of your PTO contribution. The remaining balance is your gift to the Foundation.)
Signature for payroll authorization _____
(* Note - the code AC '10 on your payroll stub will reflect deductions.)

3. Please make this gift in Honor/Memory (please circle one) of _____.

Name of individual to be honored/memorialized

Please notify the following of my gift: _____
Name(s) to be notified of your gift (gift amount is confidential)

Address

City/State/Zip

Donor Recognition

- All donors to the 2010 Associates Campaign will receive a name badge ribbon.
- All donors of \$129 or more (Anniversary Contribution) will receive a campaign logo charm.
- Donors of \$250, \$500 and \$1,000 or more will receive a contribution thank you gift.
- Donors of \$1,000+ will become members of the St. Vincent Society and have their names included on a donor recognition plaque.
- Donors of \$10,000+ will become members of the Seton Society.

Thank you for your contribution! You will receive a tax acknowledgement of your gift from the Foundation. Please return this form to: St. Vincent Foundation, 8402 Harcourt Road, Suite 210, Indianapolis, IN 46260 or give.stvincent.org. Questions? Contact 317/338-2338.