Why give at work?

At Penrose-St. Francis, you’re more than an associate. You are part of the IMPACT we make in our community.

You live out our Mission every day. We appreciate your dedication and the difference you make for Penrose-St. Francis Health Services.

And we’d like to invite you to make an even bigger impact!

Your gift will directly support patients and fellow associates right here at Penrose-St. Francis, our local and global communities through the United Way and Global Health Initiatives funds.

Did you know?

- As an associate, you may be eligible to receive emergency financial assistance during financial difficulties resulting from a personal crisis or major life event. This program is funded entirely through the efforts of THIS campaign!
- In FY19, the Penrose-St. Francis Health Foundation supported 76 associates with more than $70,600 thru our Associates Financial Assistance program.
- The Patient Financial Assistance program helped 175 patients in need with more than $63,600 in assistance.

Thank You

For making a difference in our community!

Every gift matters. Every gift will make a difference.

Please return your completed form to the Penrose-St. Francis Health Foundation.

For information, please contact
Robbi Dollar at (719) 776-7760
RobbiDollar@centura.org
Name: ________________________________
Email: ________________________________
Employee ID: ________________________________

PLEASE DIRECT MY GIFT TO:

Please select no more than two of the following programs to support.*

Gifts must be $1 or more per pay period. Splits can only occur on gifts of $10 or more per pay period, with a maximum of two splits.

☐ Associate Financial Assistance Program (20010P124000)
☐ Patient Financial Assistance Program (20010P004000)
☐ Penrose-St. Francis Scholarships and Clinical Excellence (20010P658500)
☐ Guest House at St. Francis Medical Center (20010P680000)
☐ Pikes Peak United Way (20010H610000)
☐ Global Health Initiatives (GHI) (20010P280000)

*If no box is checked, your gift will be directed to the Patient Assistance Program.

HERE’S HOW I’D LIKE TO GIVE:

PAYROLL DEDUCTION: I authorize the Penrose-St. Francis Health Foundation to deduct the following amount from my paycheck EACH pay period beginning in January. My payroll deduction will be ONGOING until I notify the Foundation to modify or discontinue it.

☐ One hour of pay per pay period (Hour Club for full-time associates)
☐ ½ hour of pay per pay period (Hour Club for part-time associates)
☐ $__________ per pay period

ONE-TIME gift of $__________ via

☐ Payroll Deduction  ☐ Cash  ☐ Check (Payable to Penrose-St. Francis Health Foundation)

ONE-TIME PTO GIFT of ___ hours. Your PTO gift will NOT affect your net pay for the pay period. Keep in mind that do to IRS regulations, approximately 40% of your gift will be deducted to cover taxes. The remainder will go to support the program(s) you selected.

To give a gift to the Associate Campaign online: Penrosestfrancis.org/Foundation
Please call the Foundation at (719) 776-7760 if you have any questions or need additional information.

AUTHORIZATION:

We must have your signature to process your gift.

Please PRINT Your Name: ________________________________
Signature: ________________________________

Date: ________________________________

Your gift is tax deductible as allowed by law.