

# Employee Giving Form

Name (please print): \_\_\_\_\_ Employee #: \_\_\_\_\_

Home Address (street, city, state, zip code): \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_

Preferred Email: \_\_\_\_\_

I would like to give to (please select one):

- Beyond Barriers Campaign
- Colleagues Care
- Eskenazi Health

Payment method (please select one):

- Enroll in Payroll Deduction:** I hereby authorize Eskenazi Health or Health & Hospital Corporation or Eskenazi Medical Group to deduct and withhold the amount specified below from each of my payroll checks as a donation to Eskenazi Health Foundation. I understand that I may revoke Payroll Deduction at any time upon written notice to Eskenazi Health Foundation. *Participating in payroll deduction requires a minimum gift of \$50 paid over 5 pay periods.*

Per Paycheck	Total Per Year
\$10	\$260
\$15	\$390
\$20	\$520
\$25	\$650
\$30	\$780
\$40	\$1,040
\$50	\$1,300
\$77	\$2,002
\$100	\$2,600

I would like to (please select one):

- Make a **recurring gift** of \$ \_\_\_\_\_ per pay period beginning \_\_\_\_\_ (month).  
I will notify you when I wish to stop the recurrence of this gift.
- Make a **pledge in the amount** of \$ \_\_\_\_\_.  
I would like to give \$ \_\_\_\_\_ per pay period beginning \_\_\_\_\_ (month).

**Credit Card**

- I would like to make a **one-time gift** of \$ \_\_\_\_\_.
- I would like to make a **pledge in the amount** of \$ \_\_\_\_\_.  
I/We will make monthly payments of \$ \_\_\_\_\_ beginning \_\_\_\_\_ (month).

Credit Card (please select one):  Visa  MasterCard  American Express  Discover

Card Number: \_\_\_\_\_ Expiration: \_\_\_\_\_ CVV: \_\_\_\_\_

- Check** (enclosed and payable to Eskenazi Health Foundation) Amount: \$ \_\_\_\_\_

Employee Signature (required): \_\_\_\_\_ Date: \_\_\_\_\_

Please return form to:  
**ESKENAZI HEALTH FOUNDATION**  
 720 Eskenazi Ave.  
 Fifth Third Bank Bldg, 5th Floor  
 Indianapolis, IN 46202  
[Info@EskenaziHealthFoundation.org](mailto:Info@EskenaziHealthFoundation.org)

Eskenazi Health Foundation is a 501(c)(3) not for profit organization. Please consult your tax advisor as to the tax deductibility of your contribution.

