

Company # _____ Name _____ Address _____ City _____ Zip _____ Employee # _____ Cost Center _____	<b>SMCF/PAYROLL USE ONLY</b>
	Campaign: Events Fund(s): _____ Appeal: EMP Giv Batch _____ Date to Payroll _____ Total per pay period \$ _____ Total per year \$ _____ SMCS

**SMCS EMPLOYEE CARING & SHARING CAMPAIGN**

**Please check the level you wish to contribute through payroll deduction:**

- |   |  |
|---|--|
| <input type="checkbox"/> \$39 per pay period x 26 = \$1,014 | <input type="checkbox"/> \$ 8 per pay period x 26 = \$ 208 <i>(receive a gift)</i> |
| <input type="checkbox"/> \$19 per pay period x 26 = \$ 494  | <input type="checkbox"/> \$ 5 per pay period x 26 = \$ 130                         |
| <input type="checkbox"/> \$12 per pay period x 26 = \$ 312  | <input type="checkbox"/> Other (\$_____ per pay period x 26 = \$_____ )            |
- Hourglass Club** *Hourglass Club is for individuals who donate one hour of their pay per pay period or more.*

**I prefer to donate:**

- One-time Donation \$\_\_\_\_\_ Cash/check  P.T.O. \$\_\_\_\_\_ *(ask your Caring & Sharing Representative for the PTO form)*
- One-time Donation \$\_\_\_\_\_  Visa  Mastercard  American Express  Discover  
 Credit Card # \_\_\_\_\_ Exp.: \_\_\_\_\_ Signature \_\_\_\_\_
- I would like to make a gift through a will or trust. Please contact me.

**Designation:**

1. I want to put my gift to work in this special area. *(write in the code and listing from the reverse side)* \_\_\_\_\_
2. I want my gift to go where the need is greatest.

**UNITED WAY CAMPAIGN**

United Way invests in results-oriented programs and services, focusing on education, health, safety, and self-sufficiency, in Amador, El Dorado, Placer, Sacramento, and Yolo counties. For more information, contact your Committee Representative or visit [www.yourlocalunitedway.org](http://www.yourlocalunitedway.org).

**Please check the level you wish to contribute through payroll deduction:**

- |   |   |
|---|---|
| <input type="checkbox"/> \$39 per pay period x 26 = \$1,014 | <input type="checkbox"/> \$ 8 per pay period x 26 = \$ 208              |
| <input type="checkbox"/> \$19 per pay period x 26 = \$ 494  | <input type="checkbox"/> \$ 5 per pay period x 26 = \$ 130              |
| <input type="checkbox"/> \$12 per pay period x 26 = \$ 312  | <input type="checkbox"/> Other (\$_____ per pay period x 26 = \$_____ ) |

**I prefer to donate:**

- One-time Donation \$\_\_\_\_\_ Cash/check

**Designation:**

- I want my gift to go where the need is greatest.
- Community Impact Fund \_\_\_\_\_ Code \_\_\_\_ \_
- Agency Name \_\_\_\_\_ Code \_\_\_\_ \_ *(ask your C & S Representative for the code numbers)*

**AUTHORIZATION**

**I authorize payroll to deduct the amount(s) indicated from each paycheck beginning Jan 1, 2005 (or as soon as my pledge is received by payroll) through December 31, 2005.**

Signature \_\_\_\_\_ Date \_\_\_\_\_

Department \_\_\_\_\_ Facility \_\_\_\_\_ Work # \_\_\_\_\_

Other names (maiden name) by which you have donated to the Foundation \_\_\_\_\_

Please print your name as you wish it to appear in our Annual Report \_\_\_\_\_

*For more information, ask your manager about the Employee Caring & Sharing Campaign or call the Foundation at 733-3863.*

*Thank you For your Support!*  
**CARING & SHARING CAMPAIGN 2004/2005**

# Sutter Medical Center Foundation...

The philanthropic organization supporting Sutter Medical Center, Sacramento:  
Sutter General Hospital • Sutter Memorial Hospital • Sutter Cancer Center • Sutter Center for Psychiatry • Sutter Institute for Medical Research • Sutter VNA & Hospice

The following list represents many of our special funds with a brief description of where your donation goes. **If you do not see something on this list that you wish to support use the blank space, after #1, on the front of the form to designate your contribution.** When you designate your gift to a specific area, it will be used to support programs and services within that area, as selected by the SMCF Board of Trustees.

**Where the Need is Greatest (UNREST)** Administered by the Sutter Medical Center Foundation Board of Trustees, a group of 25 community members who provide direction, stewardship, fundraising and leadership to the Foundation. All funds from this account are allocated based on the needs of SMCS.

**Children's Bereavement Art Group (HOCBAG)** Provides a safe environment for children, who have lost a loved one, to gather and express grief through various art activities. There is no charge to the participants for this program.

**Child Life Program (CHLIFE)** Supports programs for play, activities and education which assist pediatric patients and their families in coping with medical diagnosis and treatment.

**Employee Hardship Fund (SAMEMP)** Provides assistance to employees who are experiencing extreme financial hardship as a result of catastrophic events beyond their control.

**Family Practice Residency Training Fund (FAM)** Supports program excellence through educational materials, external conferences and equipment.

**Lifeline (SELIFE)** Supports Lifeline equipment and 24 hour service by phone to individuals, enabling them to remain in their own homes.

**SMCS, Nursing Education and Scholarship Fund (EDNURSE)** Provides funds to support and encourage employees who have chosen to pursue or continue nursing education.

**Spiritual Care (PASTOR)** Supports Sutter's accredited Spiritual Care training program for all faiths, Spiritual Care services for our patients and staff, and maintains the chapels at SMH and SGH.

**Sutter Diabetes Care Center (DIAB)** Supports education and support services for diabetic child, teen or adult patients and their families.

**Sutter General Hospital (HPSGH)** Provides funds to augment programs, services and clinical equipment based on the established priorities of the hospital.

**Sutter Hospice Care (HOSC)** Supports information, education and home care for patients and their families during the final months of life. All patients receive service without regard to ability to pay.

**Sutter Institute for Medical Research (RESGEN)** Supports our participation in hundreds of investigative clinical studies resulting in significant medical advances in diagnosis, treatment and prevention.

**Sutter Samaritan Fund (SAMGEN)** Utilized for needy patients who have non-acute medical expenses, which are not covered by insurance including prescriptions, wheelchairs, bus passes, limited housing or short-term home care.

**Sutter Medical Foundation (HPSMF)** Supports the health care needs of Sutter Medical Foundation patients and their families.

**Sutter Memorial Hospital (HPSMH)** Provides funds to augment programs, services and clinical equipment based on the established priorities of the hospital.

**Sutter Oaks Midtown (SESOMID)** Supports patient care programs for recreation/enrichment activities, education and clinical equipment in a skilled nursing facility for adults of all ages.

**Sutter Specialty Services** Donations to any of the following areas support patient and family care programs for prevention, outreach, early detection/diagnosis, treatment, education, enrichment and recreation activities, training, research and clinical equipment. Use of the funds is determined by current departmental priorities.

- **Special Care Nursery (WHSPCN)**
- **Sutter Cancer Institute (CANGEN)**
- **Sutter Center for Psychiatry (MHMENT)**
- **Sutter Center for Women's Health (WHGEN)**
- **Sutter Children's Center (CHGEN)**
- **Sutter Heart Institute (HTGEN)**
- **Sutter Neuroscience Institute (NEURO)**
- **Sutter Orthopedic Institute (ORTH)**
- **Sutter Spine Institute (NESPINE)** )

**Sutter Resource Library (LIBRARY)** A full service medical library offering information, educational, and research material to consumers, physicians, and staff.

**Sutter SeniorCare (SECARE)** Provides full healthcare and supportive services for low income, frail elderly. Donations support programs for recreation, enrichment, education and clinical equipment.

**Sutter Transitional Care Center (SESTCC)** Supports programs and services that assist patients as they recover from illness, injury or surgery.

**Sutter Visiting Nurse Association (VNA)** Supports consumer health screenings, educational programs and patient care programs for prevention, treatment, training and clinical equipment.

**Volunteer Services (VOLSER)** Provides healthcare education and training for our high school and college student volunteers and supports the adult volunteer program.