

2022

# CHAMPIONS

EMPLOYEE ANNUAL GIVING CAMPAIGN

Supporting Our Health System's Charitable Work

Please return your gift to Gail Dexter at Concord Hospital Trust.  
Via Inter-Department Mail

### My information:

NAME \_\_\_\_\_

DATE \_\_\_\_\_ DEPARTMENT/UNIT \_\_\_\_\_

PHONE OR EXT \_\_\_\_\_ PREFERRED E-MAIL \_\_\_\_\_

### Amount of my gift:

- I WANT TO SUPPORT THE CHAMPIONS EMPLOYEE ANNUAL GIVING CAMPAIGN WITH A GIFT OF \$ \_\_\_\_\_
- \$130 = \$5 PER PAYCHECK
- \$260 = \$10 PER PAYCHECK
- \$520 = \$20 PER PAYCHECK
- \$1000 = \$38.46 PER PAYCHECK PRESIDENT'S SOCIETY
- \$ \_\_\_\_\_ OTHER

### Designate my annual gift to:

- CONCORD HOSPITAL
- CONCORD HOSPITAL - LACONIA
- CONCORD HOSPITAL - FRANKLIN

#### FOR:

- UNRESTRICTED (GREATEST NEEDS OF THE HOSPITAL)
- MY CHOICE (WRITE IN THE DEPARTMENT/UNIT/PROGRAM) \_\_\_\_\_

*(Ex.: Helping Hands Fund, Payson Center for Cancer Care and the Concord Hospital Trust Scholarship Fund.)*

### Payment method:

#### OPTION #1: PAYROLL DEDUCTION

- I AUTHORIZE MY EMPLOYER TO DEDUCT \$ \_\_\_\_\_ FOR \_\_\_\_\_ PAY PERIOD(S) FOR A TOTAL CONTRIBUTION OF \$ \_\_\_\_\_.  
*(There are 26 pay periods per year. Your gift by payroll deduction will begin the first pay period after your pledge has been made.)*
- I AUTHORIZE MY EMPLOYER TO DEDUCT \$ \_\_\_\_\_ PER PAY PERIOD CONTINUOUSLY. *(Contribution will continue until the Trust is notified otherwise.)*

#### OPTION #2: CASH/CHECK

- PLEASE ACCEPT MY DONATION OF \$ \_\_\_\_\_. *(Checks are made payable to Concord Hospital Trust.)*

#### OPTION #3: CREDIT CARD

- ONE TIME CREDIT CARD CHARGE OF \$ \_\_\_\_\_.
- I AUTHORIZE CONCORD HOSPITAL TRUST TO CHARGE \$ \_\_\_\_\_ TO MY CREDIT CARD FOR \_\_\_\_\_ MONTHS **OR** CONTINUOUSLY \_\_\_\_\_  
 VISA    MASTERCARD   CARD # \_\_\_\_\_ EXPIRATION \_\_\_\_\_ CSC \_\_\_\_\_

SIGNATURE: \_\_\_\_\_

### Recognition:

- IN MEMORY OF \_\_\_\_\_
  - IN HONOR OF \_\_\_\_\_
- HOW WOULD YOU LIKE TO BE RECOGNIZED? *(Ex. Mrs. Jane Doe, Dr. & Mrs. John Doe, The Doe Family)* \_\_\_\_\_
- I WOULD LIKE MY GIFT TO REMAIN ANONYMOUS



For more information, call Concord Hospital Trust at (603)227-7162.