Dear Emanate Health Family,

Each of us is driven by our desire to keep our communities well. As an employee, you live this mission with each patient, each shift, and each step you take in support of our health system. When our communities need us most, you deliver on this commitment to compassionate, comprehensive care, and I am proud to serve alongside you.

Many community partners see the value of the services you provide, and have chosen to invest as foundation donors so others can receive this world-class health care. During our historic \$25 million fundraising campaign, we are modernizing our facilities, advancing our technology, meeting our community's most pressing health needs, and ensuring these critical services for future generations.

Through the Emanate Health Employee Giving Program, employees also can choose to give back in this same spirit. Through payroll deductions or a one-time contribution, you can direct your giving to a specific hospital, or you can help where the need is greatest throughout Emanate Health. Your gift of any size makes a difference, especially during our campaign.

I am humbled by your thoughtful consideration and truly grateful for all you do to support our patients in your day-to-day work.

With gratitude,

Roger Sharma
Roger Sharma

President and CEO Emanate Health
Employee Donor, Emanate Health Foundation



**OUR MISSION**: Emanate Health exists to help people keep well in body, mind and spirit by providing quality health care services in a safe, compassionate environment.

#### **OUR VALUES**

RESPECT EXCELLENCE COMPASSION INTEGRITY STEWARDSHIP

Emanate Health Foundation 1041 W. Badillo St., Suite 106 Covina, CA 91722-9943 626.814.2421

emanatehealth.org/foundation

Emanate Health Foundation is a 501(c)(3) nonprofit organization (Federal Tax ID#95-2534063).

# A Commitment to Care: Emanate Health Employee Giving



The Emanate Health Employee Giving Program is a voluntary opportunity for employees who believe so strongly in our mission that they are willing to support it above and beyond their everyday work by giving back to the Foundation.

#### WHY SHOULD I GIVE?

As an employee, you have a unique opportunity to participate as a donor, as you see firsthand the impact of your investment in your day-to-day work. Joining alongside individuals and businesses in the community, you can help support our hospitals and health care programs through your tax-deductible contributions.

When the Foundation applies for grants, the percentage of employees giving helps to strengthen our proposals. Your support as an employee donor, no matter the amount, helps secure more funding for our hospital system!

## DO ALL EMPLOYEES AUTOMATICALLY PARTICIPATE?

Participation in the Employee Giving Program is completely voluntary.

## I AM INTERESTED IN GIVING. **HOW DO I PARTICIPATE?**

There are many ways for you to make an impact through giving, but the easiest way is through payroll deduction. You choose the amount to be deducted each pay period (\$5 minimum). You can also make a one-time gift with a check or credit card.

# HOW DO LINCREASE OR CANCEL MY **PARTICIPATION?**

You can increase or cancel your participation anytime by contacting the Foundation.

### WHAT DOES MY GIFT DO?

The Emanate Health Employee Giving Program provides you the opportunity to give back in a way that directly benefits our patients' health and wellness. You can direct your giving to a particular hospital or to support Emanate Health's greatest needs. Taken together, these gifts make a big impact. Contributions of \$100 or less added up to more than \$64,000 in 2023, so every gift makes a difference!

## IS MY GIFT TAX-DEDUCTIBLE?

Your gift is tax-deductible to the full extent permitted by IRS regulations. The Foundation will send you an annual contribution summary at the beginning of each calendar year for



#### YES, COUNT ME IN AS AN EMPLOYEE DONOR!

NAME
EMPLOYEE ID NO.
CAMPUS/DEPARTMENT
PHONE OR CAMPUS EXTENSION
EMAIL
HOME ADDRESS
☐ I WANT TO PARTICIPATE
Please deduct \$ per pay period. All deductions are continuous unless requested by employee in writing. All payroll deductions begin within two pay periods of receipt of this form.
☐ I AM CURRENTLY PARTICIPATING
Please increase my deduction to \$per pay period.
$\square$ I WISH TO MAKE A ONE-TIME DONATION
Check enclosed for \$ payable to: Emanate Health Foundation.
LIVANT TO DECIGNATE MY CIET TO DENEELT
I WANT TO DESIGNATE MY GIFT TO BENEFIT:  □ Where the Need is Greatest Throughout Emanate Health  □ Queen of the Valley Hospital □ Inter-Community Hospital □ Foothill Presbyterian Hospital
<b>THANK YOU!</b> Please return this form to: Emanate Health Foundation 1041 W. Badillo St., Suite 106 Covina, CA 91722-9943

