

Associate Giving Form



I am pleased to support the mission of Adventist Health Sonora.

Gift Designation

- This gift is **unrestricted** and may be used to support the most current needs of Adventist Health Sonora Foundation:
- Please **designate this gift** to the specific purpose/center/service:

Automatic Payroll Deduction

Automatic Payroll Deduction gifts will remain in effect until the employee sends a written request to the Adventist Health Sonora Foundation to discontinue deductions. Associates will be recognized by the Adventist Health Sonora Foundation for their total annual giving.

Hour Club Member

- I would like to donate 1-hour per pay period Hourly Rate \$ _____

Signature (I authorize Human Resources to release my hourly rate information to Philanthropy) Date

Recurring Payroll Deduction

- I would like to make a gift of: \$30 \$20 \$10 \$5 \$2.50 other \$ _____ each pay period.

One-Time Gift

- I would like to make a one-time gift of: \$1,000 \$500 \$250 \$100 other \$ _____
Minimum Donation \$5

Payment Method

- Cash
- Personal check made payable to Adventist Health Sonora Foundation is enclosed
- Payroll Deduction
- Credit card** For one-time gifts, recurring gifts, or pledge payments **Credit Card Online** Secure gifts can be made at sonora.give.adventisthealth.org/donate

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Credit Card Number: Visa MasterCard AmEx Discover Expiration Date (MMYY) CVV

Donor Information

Dr. Mr. Mrs. Ms.

Primary Donor Name (as you would like it acknowledged and credited)

Employee ID # Unit/Department

Home Address

City State Zip

Phone Personal Email

I prefer this gift to be anonymous.

Signature (required) Date

Associate Giving Impact

"From the moment I started working here I felt blessed to see the great work the hospital does. I started giving on my first day. In my role I have seen the direct impact of these funds as well. Adventist Health Sonora is making a difference. We are making a difference in our communities and for our Adventist Health family."

- Drew Moore, Adventist Health Sonora

Return this completed form to:

Adventist Health Sonora Foundation
 1000 Greenley Road
 Sonora, CA 95370
 giving@ah.org
 Phone: 209-536-5029

Make a one-time gift at:

sonora.give.adventisthealth.org/donate