

give a **BOOSTER SHOT**

County of Santa Clara **Employee Payroll Deduction Form**

To have your donation to the VMC Foundation "Give a Booster Shot" fundraising campaign automatically deducted from your paycheck, please print and complete this form.

Return form to the VMC Foundation: **FAX** (408) 885-5207 **PONY** 2400 Moorpark Ave #207
EMAIL SCANNED FORM VMCFoundation@hhs.sccgov.org

★ ALL PAYROLL DEDUCTIONS WILL BEGIN THE FIRST PAY PERIOD OF SEPTEMBER 2011 ★

PLEDGE INFORMATION

Step 1:

Decide how much you want deducted from each paycheck:

\$ _____

Please read:

Deductions must be at least \$1 per paycheck.

If you are able to donate at least **\$8 per paycheck** over five years, you will make a total donation of \$1,000 and will be considered a **Super Booster**.

Super Boosters will have their names included on a donor wall in the new hospital building.

Step 2:

Decide how long you want to make your deduction:

CHECK ONE

- Option 1:** I want to be a *Super Booster*. Please deduct this amount until I reach a total donation of \$1,000 (deduction must be \$8 or more).
- Option 2:** I want to be a *Super Booster*, and I want to give more than \$1,000. Please keep deducting this amount until I reach a total donation of \$_____.
- Option 3:** I want to be a *Super Booster*, and I want to give more than \$1,000. Please keep deducting this amount ongoing until I ask you to stop.
- Option 4:** Sorry, I can't be a *Super Booster*, but I can still make an important contribution. Please deduct this amount until I reach a total donation of \$_____.

CONTACT INFORMATION

Step 3: *Please print clearly.*

LEGAL NAME First : _____ Last : _____

Preferred First Name: _____ Job Title: _____

Employee ID Number: _____ ← Refer to your most recent paycheck. Your employee ID is located in the center top box.

Home Address: _____ City: _____ Zip: _____

Unit/Dept and PONY Address: _____

Work Phone: _____ Email Address: _____

Did another hospital employee encourage you to donate? If so, who? _____

CERTIFICATION

Step 4: Please sign here **X** _____



The VMC Foundation is a non-profit charitable 501(c)(3) organization and your donation is tax deductible to the full extent of the law. No goods or services were provided in consideration of your gift. Your pledge will be processed as an unrestricted gift to the VMC Foundation through the system established by the Combined Giving Campaign of Santa Clara County. The VMC Foundation code for 2011 is 7034.