

Fund Descriptions

Toledo Region Greatest Need Fund: Helps meet the greatest and most pressing needs in the communities we serve.

Local Greatest Need Funds: Provide resources to the location of your choice.

Mercy College Funds: Support general scholarships through the Mercy College Scholarship Fund or help students facing financial hardships through the Mercy College Student Emergency Fund.

Patient Care Funds: Address the financial needs of patients experiencing crises.

United Way of Defiance, Greater Toledo or Tiffin: Community specific organizations that work to improve the lives of residents through partnerships and outreach.

Ministry-wide funds

Caring for Our Own Fund: Provides aid to associates facing financial hardships.

Bon Secours Mercy Health Impact Fund: Impacts the greatest needs ministry-wide. Your gift will be shared among all BSMH Foundation markets.

FAQs

Why is an associate campaign important? Your gift sends a powerful message of belief in our Mission beyond your everyday work and inspires others to support our work, too.

Why is my gift more important than ever? The pandemic has brought to light new technological and clinical needs in our hospitals. The economic downturn has challenged our most vulnerable patient populations.

How does my gift impact my community? Your donations make it possible for the Foundation to support projects and initiatives focused on great health care for the communities we serve and help for our most vulnerable patient populations. Funds remain local to help meet local needs for patient care and community investment.

How much should I give? Please consider a gift at a level that is comfortable and meaningful to you.

Can I donate the value of Personal Time Off (PTO)? Non-exempt (hourly paid) associates may donate PTO. **PTO policy no longer allows exempt (salaried) associates to donate PTO.**

When does payroll deduction start? One-time payroll deductions and PTO donations take place in Nov. 2022; ongoing payroll deductions will begin the first pay period of 2023.

What if I donated earlier this year? If you have made a new gift(s) in 2022, your gift will be counted in the Give for Good Campaign and you may receive Called to Shine points based on your giving level. We encourage you to pledge your 2023 gift during this year's Give for Good Campaign.

What if I have an existing ongoing recurring gift? If you signed up in a prior campaign for an ongoing recurring gift, you do not need to renew your support. However, you may take this opportunity to change your gift. Any changes you make will replace your current gift.

Scan to make
your gift today!



Thank you for
giving for good!

BON SECOURS MERCY HEALTH
Foundation

**GIVE FOR
GOOD**

The Power of Us
Associate Giving Campaign

If no envelope provided, mail completed form to:

Mercy Health Foundation
6762-Toledo, LBX 632660
P.O. Box 5776
Cincinnati, OH 45273-9942

Questions?

Call 419-251-2117
or email giveforgood@bsmhealth.org

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SEPTEMBER 2022
[BSMHgiveforgood.com](https://www.bsmhgiveforgood.com)

GIVE FOR GOOD

The Power of Us

Ways to make good happen

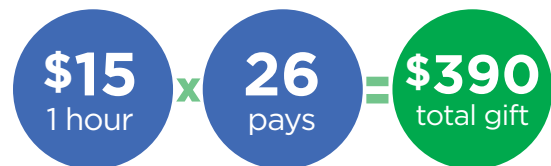
As an associate, you have several convenient ways to make your gift:

- Payroll deductions
- One-time cash, check or credit card gift
- Donate paid time off (**only available for non-exempt associates**)
- Pledge over 26 pay periods
- Recurring gift that continues as long as you desire
- Become a Power Hour donor

Be a Power Hour donor!

Make a big impact with an easy, personalized way to give based on your hourly wage.

Example:



Giving levels and rewards

Please select your reward below:

Power Hour

(one hour of pay per pay period at base rate)

Choose a box below:

- 1,200 Called to Shine points
- I do not wish to receive Called to Shine points

Lead for Good

(\$1,000 per year; only \$38.47 per pay period)

Choose a box below:

- 1,000 Called to Shine points
- I do not wish to receive Called to Shine points

Half Hour Hero

(half hour of pay per pay period at base rate)

Choose a box below:

- 600 Called to Shine points
- I do not wish to receive Called to Shine points

All recurring donors:

If you have an ongoing recurring gift and are giving at the Power Hour, Lead for Good or Half Hour Hero level, we will email you to claim your Called to Shine points.

All donors who choose to make their gift recurring this year, or have an ongoing recurring gift will receive 100 Called to Shine points.

All donors:

All donors will receive 75 Be Well points!

Yes! I want to Give for Good!

Complete an online giving form at bsmhgiveforgood.com or return this form in the envelope provided to the address on the back of this brochure.

How much to give and giving options:

Choose a giving level or fill in another amount.*

Payroll deduction

- Power Hour** (1 hour of pay per pay period*)
Please estimate your hourly pay rate: \$_____
- Half Hour Hero** (1/2 hour of pay per pay period*)
Please estimate your hourly pay rate: \$_____
- Lead for Good** = \$1,000 (38.47 for 26 pay periods)
- \$_____ per pay period
- \$_____ one-time payroll deduction

*Your pay period gift will be recurring, meaning it will continue each year, unless you decide to stop or change the amount of your gift. You may opt out of recurring giving below.

- I prefer to opt out of recurring giving; my per pay period gift will stop after 12/31/2023.**

One-time cash gift

- \$_____ cash/check enclosed
(payable to Bon Secours Mercy Health Foundation)

Credit Card gift. Charge to my:

- VISA MasterCard AmEx Discover
- Name on Credit Card _____
- Card # _____ Exp. Date _____

PTO donation**

(deducted from PTO balance in November 2022)
_____ # PTO hours (8 hours minimum donation)

Due to policy changes, PTO donations can only be accepted from non-exempt (hourly) associates.

****PTO donations:** I understand the final value of PTO I donate will be reduced by 10% per tax laws and Bon Secours Mercy Health policy, and the remainder will be reported as taxable compensation to which applicable taxes will be applied. The after-tax amount will be the value of my donation and can be reported on my personal tax return as a charitable contribution consistent with IRS guidelines.

My information

Name _____ Associate ID # _____

Address _____

City / State / ZIP _____

Email (required) _____

Phone _____

Direct my gift to:

(total of all selections must equal 100%)

- Toledo Region Greatest Need _____ %
- Defiance Hospital _____ %
- Perrysburg Hospital _____ %
- St. Anne Hospital _____ %
- St. Charles Hospital _____ %
- St. Vincent Medical Center _____ %
- Tiffin Hospital _____ %
- Willard Hospital _____ %
- Defiance Patient Care Fund _____ %
- Mercy College Student Emergency Fund _____ %
- Mercy College Scholarship Fund _____ %
- Marguerite D'Youville Program (Metro) _____ %
- Tiffin Patient Care Fund _____ %
- Willard Patient Care Fund _____ %
- United Way: (circle one) Defiance United Way Greater Toledo United Way Tiffin United Way _____ %
- Other (if applicable) _____ %

Ministry-wide funds:

- Caring for Our Own Fund (for associate hardships) _____ %
- Bon Secours Mercy Health Impact Fund _____ %