NOTE: If you currently give through recurring payroll deduction, your donation continues indefinitely and you do not need to fill out this form.
To change your recurring payroll deduction donation, see step two below.

STEP ONE: Consider a gift to Providence foundations in support of our Mission

See back of form for a list of funds. If you do not note a specific fund, your donation will be credited toward the Greatest Need Fund. If you choose to make payments through payroll deduction, the minimum per fund, per pay period is $2.

<table>
<thead>
<tr>
<th>Providence Foundations</th>
<th>Specific Fund Choice(s)</th>
<th>Per Pay Period</th>
<th>Annual Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Providence Benedictine Fdn.</td>
<td>______________________</td>
<td>__________</td>
<td>x 26</td>
</tr>
<tr>
<td>Providence Hood River Fdn.</td>
<td>______________________</td>
<td>__________</td>
<td>x 26</td>
</tr>
<tr>
<td>Providence Medford Fdn.</td>
<td>______________________</td>
<td>__________</td>
<td>x 26</td>
</tr>
<tr>
<td>Providence Milwaukie Fdn.</td>
<td>______________________</td>
<td>__________</td>
<td>x 26</td>
</tr>
<tr>
<td>Providence Newberg Fdn.</td>
<td>______________________</td>
<td>__________</td>
<td>x 26</td>
</tr>
<tr>
<td>Providence Portland Fdn.</td>
<td>______________________</td>
<td>__________</td>
<td>x 26</td>
</tr>
<tr>
<td>Providence Seaside Fdn.</td>
<td>______________________</td>
<td>__________</td>
<td>x 26</td>
</tr>
<tr>
<td>Providence St. Vincent Fdn.</td>
<td>______________________</td>
<td>__________</td>
<td>x 26</td>
</tr>
<tr>
<td>Providence Willamette Falls Fdn.</td>
<td>______________________</td>
<td>__________</td>
<td>x 26</td>
</tr>
</tbody>
</table>

Total gift to Providence per pay period: $________ x 26 $________

STEP TWO: Choose your payment option and sign

I wish for my gift to remain anonymous.

Choose payment option:

- NEW recurring payroll deduction donation
  (All payments begin the next open pay period, and continue indefinitely until you opt out.)
- EDIT my current recurring payroll deduction donation
  (Changes made above will be reflected in the next open pay period and continue indefinitely until you opt out.)
- ONE-TIME payroll deduction
  (the next open pay period, with $10 minimum)

PLEASE SIGN BELOW:

[Signature] Date

Your signature is required to authorize or edit payroll deductions.

- Cash/check enclosed for $___________
  Please make check payable to the Providence foundation you are donating to.
- Credit card Please go online to our secure donation form at ProvidenceFoundations.org/employee.

Please return this form to your foundation office or email to OR.Foundations@providence.org

PROVIDENCE Foundations of Oregon
Your gift to Providence foundations

When you support Providence foundations, you are connecting with our Mission. Here are some of the funds to which you may direct your gift:

**Providence Benedictine Nursing Center Foundation**
- Area of Greatest Need
- Building and Equipment
- Home Health
- Landscaping and Gardens

**Providence Community Health Foundation – Medford**
- Area of Greatest Need
- Behavioral Health / Fr. Jim Clifford
- Caregiver Education
- Mother Gamelin (charity care)
- Population Health/Housing

**Providence Hood River Memorial Hospital Foundation**
- Area of Greatest Need
- Don Benton Cancer Patient Assistance
- Behavioral Health
- Julie Belief Cancer Screening
- Hospice - Area of Greatest Need

**Providence Milwaukie Health Foundation**
- Area of Greatest Need
- Behavioral Health / Mental Health Wellness
- Community Teaching Kitchen
- Critical Care Unit
- Nursing Scholarship

**Providence Newberg Foundation**
- Area of Greatest Need
- Behavioral Health
- Cancer Fund
- Heart Fund
- Mike Olberding Education Fund

**Providence Portland Medical Foundation**
- Area of Greatest Need
- Behavioral Health
- Cancer Research
- COVID-19 Relief Fund
- Emergency Services
- Heart
- Medical Group

**Providence St. Vincent Medical Foundation**
- Brain and Spine
- Cancer Research
- Children’s Health
- Emergency Services
- Heart Institute
- Where Need is Greatest

**Providence Seaside Hospital Foundation**
- Area of Greatest Need
- Heart
- Providence Cares

**Providence Willamette Falls Medical Foundation**
- Area of Greatest Need
- Birthplace (newborn services)
- Jilda B. Danielson Cancer Support Services Endowment
- Children’s Health (behavioral health)
- Education Fund

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**Examples of gifts broken down per pay period**

All payroll deductions begin the next open pay period, and continue indefinitely until you opt out by emailing OR.Foundations@providence.org.

<table>
<thead>
<tr>
<th>Per-Pay-Period Gift Amount</th>
<th>Annual Total Gift</th>
<th>Per-Pay-Period Gift Amount</th>
<th>Annual Total Gift</th>
<th>Per-Pay-Period Gift Amount</th>
<th>Annual Total Gift</th>
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<tbody>
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</tr>
</tbody>
</table>

**Questions?** Email OR.Foundations@providence.org

*If you are currently giving through recurring payroll deduction, your donation continues indefinitely and you do not need to sign up.*

*If you would like to make a change or cancel your recurring payroll deduction donation, please contact OR.Foundations@providence.org.*