



### Why should I participate in GIVING?

GIVING directly impacts our mission. Patient care services, health education and vital equipment purchases are all possible through our associates' generosity. For the next three years, we are also working together to raise funds to expand our chapel at CHRISTUS Highland Medical Center.

### How much of my donation actually goes to the area that I choose?

100% of donations to GIVING are directed to your designated area of support. You can be confident your gift is being used the way you want.

### Is my gift tax deductible?

Yes, your gift is being made to CHRISTUS Foundation Shreveport-Bossier, a 501(c)3 not-for-profit organization, which raises and manages charitable funds to support CHRISTUS Shreveport-Bossier and our charitable affiliates. Your contributions are post-tax, so you will receive a year-end tax receipt, and these donations can be deducted if you itemize your tax return.

### Can I give anonymously?

Yes, simply select the option on your giving form that tells us you do not wish to be listed in donor communications or on any plaque or recognition activity.

Shreveport, LA 71105  
7591 Fern Avenue, Suite 1903  
CHRISTUS®  
Foundation-Shreveport-Bossier

PLACE  
STAMP  
HERE

Where My **PASSION**  
**GIVING**  
Meets Our **MISSION**

**"Every gift** to the CHRISTUS Ministry, no matter the size, is valuable and makes a difference for our health system. It is because of you and your generosity that we are making a difference, saving lives, giving hope, and providing comfort. As Jesus Christ is our example we are asked to meet the needs of those around us. This is our mission. I ask that you join me in this annual gift."

*Isaac Palmer, CEO*

 **CHRISTUS®**  
Foundation  
*Shreveport-Bossier*



# FAQs

## What is GIVING?

CHRISTUS Shreveport-Bossier associates give to help meet needs for patients and families served by our health system. Donations benefit the CHRISTUS program of your choice or the United Way. These gifts go a long way in helping CHRISTUS make a difference in serving people in our community. Gifts to GIVING can be made through payroll deduction or a one-time gift by cash, check or credit card. You can also join the Hour Club.

## What is the Hour Club?

Hour Club members give the equivalent of one hour of your salary per pay period. Associates who participate in the Hour Club all make the same sacrifice, regardless of their salary, by giving a proportionate amount of their income to the campaign. In recognition of this gift, Hour Club donors are invited to an appreciation lunch with senior leaders of the hospital and receive a branded polo-style shirt.

## Step 1: Choose A, B or C

**Giving options have been updated; all donors—including existing givers—please complete this form and turn it in.**

### A) Hour Club by Payroll Deduction

- 1 hour of pay each pay period (**HOOR CLUB MEMBERS** – Receive a polo-style shirt)

### B) Payroll Deduction (each pay period)

- \$3 per pay period (\$78 per year)       \$10 per pay period (\$260 per year)       \$40 per pay period (\$1040 per year)  
 \$5 per pay period (\$130 per year)       \$20 per pay period (\$520 per year)       Other (min. of \$1) \_\_\_\_\_ per pay period

### C) One-Time Gift – Cash or check (enclosed) or Credit Card (we will contact you to obtain credit card info)

## Step 2: Designate your gift (You may choose one or two recipients; if two, your donation will be split 50/50 to each)

- CHRISTUS Chapel expansion project       Where the need is greatest (includes Cancer Treatment Center and Hospice)  
 United Way       Children's Miracle Network Hospital programs (includes Cara Center and NICU)

## Step 3: Sign, seal and deliver to Highland Administration or Foundation Office

Name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_ My department: \_\_\_\_\_

My home address: \_\_\_\_\_ City, State, Zip: \_\_\_\_\_  
*(for year-end tax receipt to be mailed)*

- Please list my donations as anonymous in Foundation communication or donor plaque.

**List my name:** \_\_\_\_\_

**example:** Jane Smith; Mrs. John Smith; Jane & John Smith or Mr. & Mrs. John Smith

My donation is in memory of: \_\_\_\_\_

My donation is in honor of: \_\_\_\_\_

**Please provide name and address of whom you want to receive the acknowledgement of this tribute gift.**

Name & Address: \_\_\_\_\_

**\*\*If you have made a donation during the calendar year but later find you have additional individuals you would like to recognize, simply contact the Foundation (318.681.6781) with the recipient's information and an acknowledgment will be mailed.**