Signature __

Patio Garden Campaign associate gift form.

☐ YES! I would like to s University Hospital w	upport the Patio Garde vith a payroll deduction	. •	Georgetown
Contact information			
Name (your legal name as i	it appears on your badge):		
Employee number (found o	on your pay stub):		
Department name:			
Address:			
City, State, Zip:			
Phone:	Ema	ail:	
☐ I wish to have my gift ren	nain anonymous.		
Gift information			
Select your gift below and i	indicate the amount you wo	ould like to have deducted	from each paycheck.
Item	Cost per item	Number purchased	Total gift amount
4"x8" Brick	\$250		\$
12"x12" Brick	\$500		\$
Juniper tree plaque	\$500		\$
Respite bench plaque	\$1,000		\$
		Total gift:	\$
(For reference, based on 26 pa = \$1,000). Maximum number of		, ,	9.26/pay = \$500; \$38.47/pay
My total for(
My total for() Please deduct \$	year) contribution is \$	·	pay periods.

Engraving information

For engraving purposes, please note exactly how you would like your message to appear. **Please note: All engraving copy is subject to review.**

4"x8" Brick: There can be 3 lines of engraving per brick, 14 characters including spaces and punctuation in each line.	12"x12" Brick: There can be 8 lines of engraving per brick, 18 characters including spaces and punctuation in each line.
Juniper tree or respite bench plaque: Tree plaque punctuation (24 characters per line); Bench plaque: punctuation (32 characters per line).	
If ordering additional bricks, respite benches or j ensure the use correct number of lines and characte	· ·

To support the Patio Garden Campaign at MedStar Georgetown, please email this form to **madison.s.schaffer@medstar.net** or bring it to the Office of Philanthropy. If you have any questions, please call Madison Schaffer at **202-444-0721.**

Please make a copy of this commitment for your records. Upon full payment, we will send you a receipt for tax purposes. All philanthropic gifts are fully tax-deductible.