

# INSPIRED WORKPLACE GIVING

## Payroll Deduction Form

Pledge to give today. We've provided a simple and tax-effective way for you to help improve the health and well being of Alaska Native people through easy payroll deductions.

Making a donation is a personal decision. Whatever you choose to give will make a positive difference in the lives of our people. Every dollar counts. And your gifts, energy and passion are even more powerful when you share them with others!

### Please select a fund:

#### Area of Greatest Need

#### Patient Care

- ANMC Emergency Department Clothing Fund
- ANMC Oncology & Cancer Care Fund
- ENT & Ophthalmology Clinic Fund
- Health Education Fund (knowledge for providers & patients)
- Medical Care Improvements
- Palliative Care Fund
- Surgical Services Fund

#### Healthy Kids

- ANMC Family Birthing Services Fund (OB & Maternal Services)
- Camp ARCTIC Fund (for kids with arthritis)
- Camp Coho Fund (for kids dealing with loss)
- Child Life Fund
- Kids Wing at ANMC Fund (Pediatrics)
- Lori Lange Memorial Toy Fund

#### Healthy Communities

- ANTHC Education & Development Center
- Elder Health Fund
- Healthy Village Environments Fund
- Mindy Schloss Memorial Fund for Suicide Prevention
- Oral Health Fund

### Contact Info

NAME \_\_\_\_\_

DEPARTMENT \_\_\_\_\_

PHONE \_\_\_\_\_

EMAIL \_\_\_\_\_

EMPLOYEE ID # \_\_\_\_\_

(located on back of badge)



### Please select an amount:

|                          | AMOUNT/<br>PAY PERIOD | DONATIONS/<br>YEAR | ANNUAL<br>AMOUNT |
|--------------------------|-----------------------|--------------------|------------------|
| <input type="checkbox"/> | \$5.00                | 26                 | \$130            |
| <input type="checkbox"/> | \$10.00               | 26                 | \$260            |
| <input type="checkbox"/> | \$15.00               | 26                 | \$390            |
| <input type="checkbox"/> | \$20.00               | 26                 | \$520            |
| <input type="checkbox"/> | \$25.00               | 26                 | \$650            |
| <input type="checkbox"/> | \$30.00               | 26                 | \$780            |
| <input type="checkbox"/> | \$35.00               | 26                 | \$910            |
| <input type="checkbox"/> | \$40.00               | 26                 | \$1,040          |
| <input type="checkbox"/> | \$45.00               | 26                 | \$1,170          |
| <input type="checkbox"/> | \$50.00               | 26                 | \$1,300          |
| <input type="checkbox"/> | Other                 |                    |                  |
|                          | \$ _____              | _____              | \$ _____         |

By submitting this form, you are authorizing your donation to the Healthy Alaska Natives Foundation until you indicate otherwise. Please submit via interdepartmental mail by addressing it to C-HANF or by email at [info@inspiringgoodhealth.org](mailto:info@inspiringgoodhealth.org).