CHPCARES THIS MOMENT



DONOR INFORMATION	DONOR LISTING Please check one:
Name:	☐ I/We would like to be recognized as
Employee ID: Dept:	
Email:	
Phone:	
Address:	
City: State: ZIP:	☐ I/We would like to remain anonymou
FUND DESIGNATION Please direct my/our gift to the following fund(s):	
Children's Hospital Fund Other	
DONATION INFORMATION	
□ Recurring Payroll Deduction — Charge \$ Per Pay	
Check made payable to UPMC Children's Hospital Foundation*	
□ Credit Card — Charge \$ □ Once / □ Monthly*	*By completing this step, you authorize the storing of this card account for the payment amount and recurring schedule you chose
Card Type — \Box American Express / \Box Discover / \Box Mastercard /	and future agreed upon payments
Name on Card Card No	
Exp. Date Signature	
□ Direct Debit — Charge \$ □ Once / □ Monthly**	**I understand all future donations will be withdrawn directly from this account.
Account Holder's Name	
Financial Institution Branch Na	ame
Acct. Type Routing No Acc	
Please contact me about giving through a bequest, retirement account,	tax rollovers, or donor advised funds.

RECOGNITION GIFT

Option 1: Make your gift to CHP Cares early and pick up your gift at CHP Cares Day on April 29 in the Atrium.

Option 2: If you are unable to pick up you gift, or you donate after April 29, we will send you your thank you gift by mail or coordinate pick-up on a quarterly basis (July, October, January). Please select your preference below:

□ Send me my gift

□ Reach out to coordinate pick-up

Why do you choose to give back to UPMC Children's?

CHILDREN'S HOSPITAL FOUNDATION

THIS IS **OUR MOMENT** TO SHOW THAT CHP CARES

Please turn in your donation form to:

UPMC Children's Hospital Foundation, One Children's Hospital Drive, 4401 Penn Avenue, Pittsburgh, PA 15224-1342

Questions? Contact chpcares@chp.edu or 412-692-3900.

ALL CONTRIBUTIONS ARE TAX DEDUCTIBLE TO THE LIMIT OF THE LAW. OFFICIAL REGISTRATION AND FINANCIAL INFORMATION MAY BE OBTAINED FROM THE PENNSYLVANIA DEPARTMENT OF STATE BY CALLING TOLL FREE WITHIN PENNSYLVANIA 1-800-732-0999. REGISTRATION DOES NOT IMPLY ENDORSEMENT.