



*Creating
a culture of giving
where shared values*

*transform
success
into significance.*



*The Bellin Foundation
Barbara Braun*

Please return by September 30th



2006 Employee Sharing Program

THE BELLIN FOUNDATION

Dear Bellin Health Team Members:

In 2005, The Bellin Foundation launched the Employee Sharing Program, a program that invites team members to share ideas and make charitable gifts to support the enhancement of the Bellin Experience for patients and families. System-wide, \$62,000 was contributed in support of eight employee suggested items.

Today, we invite you to make a charitable gift to support the 2006 Employee Sharing Program by selecting an area of your choice from the items featured below. Like last year, these items were chosen from the list of ideas generated by Bellin team members.

Your ongoing commitment to enhancing the Bellin experience does not go unnoticed. We remain grateful for your hard work and valuable service and look forward to receiving your gift commitment by September 30th.

Sincerely,

George Kerwin
President, Bellin Health

Michael Frohna
President, The Bellin Foundation

Barbara Braun
Director, The Bellin Foundation

P.S. It's proven that when community members consider a gift to The Bellin Foundation, they are motivated to affirm the gift based in part on the level of support employees and physicians provide. Your gift truly is important and valued.

I am a/an Employee Volunteer Retiree, and want to participate in the Employee Sharing Program.

My gift to the Bellin experience is \$ _____.

Name _____ Location _____ Phone _____
(please print)

I choose to make my gift:

- As a single contribution by a check payable to The Bellin Foundation
- As a donation of _____ PTO day(s) (The monetary value of which will be transferred to the Foundation)*
- As a payroll deduction for _____ pay periods beginning on November 1, 2006.

- As a credit card gift:
 - Visa MasterCard
 - single monthly quarterly

Card # _____ Exp. date _____

Signature _____
(required for gifts made via payroll deduction)

Signature _____
(required for all credit card payments)

* PTO Policy Applies

Gift examples:

Your gift each pay period	\$2	\$5	\$7	\$10	\$20
Annual Sharing	\$52	\$130	\$182	\$260	\$520

... or a gift of your choice

Employee Sharing Program

Gift Allocation:
(select one)

- I would like half of my gift to support the area I have selected below and the remaining half allocated to support Bellin Health's strategic objectives.
- I would like my entire gift to support the area selected below.

- A Place to Sit:** Picnic Tables & Benches for BMG Clinics – any additional funds received above the cost of the tables and benches will be divided among the clinics for their additional wish list items
- Keep it Cold:** Ice Machine for 8th SSU and Nuclear Medicine
- Keep it Chilled:** Small refrigerator/freezer for nursing mothers in the Kress Birthing Center
- Warm & Cozy:** Blanket Warmers for Kress Birthing Center, Schreiber Short Stay and Nuclear Medicine
- Privacy Please:** Privacy screens in Preop 6th Floor
- Time to Relax:** Bench or picnic table for outside common areas at BPC, Allouez and Hospital campus
- Give it a Boost:** Portable battery charger pack for Security to help employees, patients and families with car trouble
- At the Bond:** Lab draw chair & patient recliner
- For the Exam:** Adjustable exam table for special needs patients at BMG Webster Clinic
- Payroll Please:** Swipe name badges for purchases in cafeteria, coffee shop, pharmacy and gift shoppe – it's that simple
- Where it's needed most**