#CentraState2020 Destination Healthier Communities

is a comprehensive initiative to maintain the high quality of medical services at CentraState and optimize the health of those in our community.

Your donation to the 2021 Employee Appeal will support:

EMPLOYEE EMERGENCY FUND
PATIENT ASSISTANCE FUND
COVID-19 FUND
EMPLOYEE SCHOLARSHIP FUND
among others

How your donation can add up:

\$ Per Pay period	1 Year	5 Years
\$1	\$26	\$130
\$2	\$52	\$260
\$5	\$130	\$650
\$10	\$260	\$1,300
\$25	\$650	\$3,250

CentraState Healthcare
Foundation
225 Willow Brook Road, Suite 5
Freehold, NJ 07728
www.centrastatefoundation.org
Tel: 732-294-7030
foundation@centrastate.org



Employee Appeal 2021



To realize CentraState's vision for the future and continue to provide the full circle of health and wellness, we need to work together both within CSHS and in our community. Before we reach out to the community, we need the support of those who know what we do every day - our employees, volunteers, leadership, board members and physicians. Help us show our community that we are proud to be a part of CentraState by making a gift to the 2021 Employee Campaign.

Donations to the annual Employee Appeal have enabled CentraState Healthcare Foundation to:

- Support fellow employees who have suffered a sudden loss in the family, house fire or other tragic crises — since 2015, your generosity has helped donate \$179,894 to 83 fellow employees who were in need!
- Expand programs such as the Statesir Cancer Center, Star and Barry Tobias Women's Health Center and more.
- Provide financial assistance to patients and residents, as well as enhance patient and resident quality of life.
- Fund seminars, certifications and scholarships to employees.
- Provide 5 x \$1000 scholarships in 2021 to employees to help further their career in a healthcare related field.

CHECK OUT OUR 2021 VIDEO!!!! And for more information please visit https://www.centrastatefoundation.org/ways-to-give/employee-appeal



Please complete this form and return to the Foundation Office or by email to foundation@centrastate.com

Employee Information: (please print)

Name:	_ Employee ID #:	Phone Number:
Department:	Home Email address:	
		n is made, your gift will be used for the area of greatest need) hip Fund Patient Assistance Fund Other:
		sizes are limited – we will do our best to accommodate your choice.
PLEASE CIRCLE ONE: S M ☐ Free CentraState mask to anyone who do served basis.		\$5). Quantities are limited – masks will be available on a first come, first
In order to receive both a t-shirt and a mask	c, a minimum donation of \$15	is requested. Please check which item(s) you are requesting.
Method of Payment – PLEASE CHEC	K ONE	
□ Payroll Deduction-MULTIPLE: Please de	duct \$ from each of n	my paychecks for number of years (2, 3, 5 years – circle one)
□ Payroll Deduction-ONE-TIME: Please ma	ake a one time deduction of	\$ from my paycheck.
☐ One Time Payment-Cash or Check- I have	e enclosed cash/check in the	e amount of \$ (checks made out to CentraState Healthcare Foundation)
☐ One Time Payment-Credit Card -Visit ht	tps://www.centrastatefounda	ation.org/ways-to-give/employee-appeal/ or call Foundation 732-294-7030.
	ill be deducted on 9/11/2021	urs. Please note: All PTO hours must be entered into the API system by the employee Please ensure that you have enough PTO hours on that date to cover this donation ses only.

GentraState Healthcare Foundation