

Dear St. Jude caregiver,



Since the opening of St. Jude Medical Center in 1957, thousands of patients have walked through our doors. Over the last six decades, the generosity of our community and our caregivers has allowed St. Jude to become one of Southern California's most advanced and respected hospitals.

During our last campaign for construction of the Northwest Patient Tower, we were proud that many of the early gifts toward our \$20 million campaign were from St. Jude Medical Center and St. Jude Heritage Health Care caregivers and physicians. We are so grateful that our skilled and compassionate staff is not only committed to providing outstanding care and service, but also to generously supporting access to exceptional healthcare for our community. **Thank you for your past support!**

Donations from our caregivers and the community are more important than ever as we embark on a \$40 million special initiatives campaign to acquire the latest advances in technology, invest in the long-term sustainability of life-saving programs, and pursue innovative ways to improve patient outcomes, from groundbreaking research to supporting nursing education. **Together, we can reach our goal and elevate care for our community to new heights.**

St. Jude Memorial Foundation's Caregiver Giving Campaign asks that you renew your pledge to our healing ministry with a donation to the campaign priority that is most meaningful to you. Whether it is a gift that will help St. Jude reach its six-needed 3D mammography units, or serving patients who live in high-need neighborhoods through our Care for the Poor programs — you can make a powerful impact on the place you work every day.

Please consider making a multi-year pledge or a one-time contribution by completing the enclosed form and returning it to the St. Jude Memorial Foundation through inter-office mail c/o Tanya Gonzalez or email Tanya.Gonzalez2@stjoe.org. If you have any questions regarding the campaign or your donation, please contact us at (714) 992-3033.



Brian Helleland, Chief Executive
St. Jude Medical Center

St. Jude Memorial Foundation
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We are incredibly proud of the passion our caregivers show for their community! As we embark on St. Jude's \$40 million special initiatives campaign, we ask you to make a contribution through our "It Starts with Us" Caregiver Giving Campaign. Your contribution is 100 percent tax-deductible and will have a direct impact on the patients you serve.

Perks of Leveling Up	CHAMPION Level	PARTNER Level	SUPPORTER Level	FRIEND Level
	One hour's pay per pay period for five years	\$25 per pay period for five years	\$10 per pay period for five years	One-time gift of \$25 or more
Appreciation Certificate	●	●	●	●
Caregiver Giving Raffle Quarterly Raffle: March, June, September, December	●	●	●	●
Department Participation Gift Ice cream for departments who achieve 90% participation	●	●	●	●
Mobile Card Holder	●	●	●	
Cell Phone Pop-Socket	●	●		
Lapel Pin	●			
Physician & Caregiver Giving Wall Included with a lifetime donation of \$2,500 or more	●	●		

A Few Highlights To Show The Impact Of Your Gift



3D Mammography

Shown to increase breast cancer detection rates by up to 40 percent, this donor-funded technology is making its way to St. Jude with two of six-needed units secured to date.



\$2.1 Million da Vinci Xi[®] Robot

The latest in state-of-the-art minimally invasive robotic surgery funded entirely by donors.



\$300,000 in Nursing Education

allowed caregivers to expand their expertise and knowledge to better serve patients and families.



580 Homeless Persons Served

by Community Care Navigation program in 2018.

Complete the back of this form to make your commitment today!

Caregiver Giving Sign-Up Form



Mr. Mrs. Ms. Dr.

Name: _____

Employee ID: _____

Department: _____

St. Jude Medical Center

St. Jude Heritage Health Care

Home Address: _____

City: _____ State: _____ Zip: _____

Telephone Number:

Home: _____ Cell: _____

Email: _____

I Intend To Support My Community In One Of The Following Ways:

Making A Pledge

I authorize a payroll deduction and wish to donate \$_____ at each pay period for five years (\$5.00 Minimum). *Please consider becoming a "Champion" caregiver donor by giving one hour's pay per pay period.*

I authorize my credit card to be billed yearly over five years, donating \$_____ each year.

OR A One-Time Gift

Check enclosed with gift of \$_____ (Made out to St. Jude Memorial Foundation).

Charge my credit card the amount of \$_____.

Select One Initiative That Speaks To Your Heart

Cancer Institute 3D Mammography

St. Jude Crosson Cancer Institute

Palliative Care

Rehabilitation Program

St. Jude Neurosciences Institute & Stroke Program

Care for the Poor

Advancing Clinical Excellence

Where the Need is Greatest

Payment Information

Card Number: _____ Exp. Date: _____ CVC Code: _____

Visa Mastercard Discover AMEX

Approval Signature: _____ Date: _____

Please send completed form to St. Jude Memorial Foundation by inter-office or mail to 1440 N. Harbor Blvd., Suite 200, Fullerton, CA 92835 or email to Tanya.Gonzalez2@stjoe.org