



PARK NICOLLET INTERNATIONAL DIABETES CENTER

Park Nicollet Foundation Contribution Form

Yes, I want to make a difference with my gift of:

\$1,000 \$500 \$250 \$100 \$50 \$25 \$10 Other: \$ _____

Giving options

- Area of greatest need
- Caring for Colleagues program
- Frauenschuh Cancer Center
- Hospice
- International Diabetes Center
- Jane Brattain Breast Center

- Melrose Center
- Park Nicollet Institute
- Struthers Parkinson's Center
- Stroke INSPIRE
- Women's Center and Services
- Other area (specify here) _____
- Team Fundraiser (team name) _____

Contact information

Your name _____

Address _____ City _____ State _____ ZIP _____

Phone _____ Email _____

For recognition purposes, please list my/our name(s) as: _____

I/we wish to remain anonymous. Please do not include my/our name(s) in any listing of donors.

Payment

Check enclosed Visa / MasterCard / American Express / Discover
(payable to Park Nicollet Foundation)

Sign me up to be a sustaining donor!
Sustaining gifts are made via credit card or payroll deduction and will continue until you request a change. Give \$10 or more a month to receive a Park Nicollet Foundation coffee mug.

Account no. _____ Exp. date _____ Signature _____

Park Nicollet payroll deduction (Park Nicollet team members only)

Employee number _____ Department _____ Location _____

Total gift amount _____ Signature _____

(Installments will be divided evenly throughout the pay periods within 2017.)

Please bill me Stock Donor advised fund Please contact me about a gift through my/our will or estate plan.

I would like to designate my gift

In honor of (person and occasion): _____ or,

In memory of (person): _____

For honorary and memorial gifts, send an acknowledgment to:

Name (please print) _____

Address _____

City _____ State _____ ZIP _____

Phone _____

Give online at parknicollet.com/give

Thank you! Your gift is tax deductible as allowable by law. A letter acknowledging your gift (without indicating amount) will be sent to the person(s) that you wish notified.

Please print and complete this form, then mail, email or fax to: Park Nicollet Foundation, 6500 Excelsior Blvd., St. Louis Park, MN 55426 foundation@parknicollet.com • 952-993-6745 fax

Double your impact

HealthPartners will provide a dollar-for-dollar match for every team member gift to Park Nicollet Foundation's Annual Campaign, up to \$500,000. This is a great way to make your gift go even further.