



**DEAR PARTNER:**

The United Hospice Foundation / Pruitt Cares is a non-profit organization whose purpose is:

- to provide ministry and support within our communities,
- to assist with individual and organizational involvement in the communities where we live,
- provide end of life education (including Camp Cocoon),
- to work to make a difference by modeling our core values of *Committed to Caring*.

The **PruittCares** portion of this program will be used entirely for assistance. The foundation's administrative costs will not be funded by any of your charitable contributions.

**The Children's Village** at Christian City is dedicated to caring for children who are without a family to support them or who are not able to reside with their family. This ministry has been added so that you may choose to apply your support through payroll deduction.

You are invited to participate through voluntary, tax-deductible contributions. If you would like to help, please fill out the payroll deduction authorization below and *submit to payroll for completion*.

**United Hospice Foundation / Pruitt Cares/The Children's Village  
PAYROLL DEDUCTION AUTHORIZATION  
Please Print Clearly**

Date: \_\_\_\_\_ Facility Name/Company #: \_\_\_\_\_

Name: \_\_\_\_\_

Beginning \_\_\_\_\_ (start date) please deduct \$ \_\_\_\_\_ from my payroll check each pay period (26 pay periods per year). I understand I may change this deduction amount twice a year, in January and July. I also understand I may stop this deduction at any time during the year.

I would like my contribution each pay period to be used for:

<b>PruittCares</b>	\$ _____ (per pay period) and/or
<b>United Hospice Foundation</b>	\$ _____ (per pay period) and/or
<b>The Children's Village</b>	\$ _____ (per pay period) for a
<b>Total</b>	\$ _____ (per pay period)

Name: \_\_\_\_\_ Date: \_\_\_\_\_

Partner's Signature: \_\_\_\_\_