



1. MY CONTACT INFORMATION (REQUIRED) Please Print

Name _____ Department _____
 Home Address _____
 Town _____ State _____ Zip _____
 Email _____ Phone # _____

2. MY GIFT (Any gift amount is appreciated)

ENROLL IN PAYROLL DEDUCTION
Choose one
 Bi-Weekly* (24 pay periods per year)
 Bi-Monthly* (26 pay periods per year)
 I authorize Mather Hospital to deduct the amount below from each paycheck until I notify The JTM Foundation to stop the deduction or I am no longer an employee of Mather Hospital.
 Other: # of payroll deductions _____ \$
 TOTAL AMOUNT PER PAY CHECK

ONE-TIME GIFT
CREDIT CARD
 VISA MC AMEX DISC
 Name on Card _____
 Card# _____
 Expiration Date: _____ Code: _____
Or CHECK
Make check payable to: \$
JTM Foundation

3. MY GIFT OPTIONS

I would like to support the Capital Building Project (Legacy Campaign)

- New Emergency Department**
- Enhanced Surgery Center**
- Hospital Lobby Renovation**
- Cardiac Catheterization and Electrophysiology Laboratories**
- Outpatient behavioral and mental health program facility**

Make a \$1,000 gift or more to the Capital Building Project and receive your name on the employee donor wall. See reverse for gift level examples.

Other areas of support

<input type="checkbox"/> Fortunato Breast Health Center	<input type="checkbox"/> Hospital Fund (all services)
<input type="checkbox"/> Nursing	<input type="checkbox"/> Pet Therapy Program
<input type="checkbox"/> Imaging Services	<input type="checkbox"/> Other patient care area _____

The JTM Foundation supports the programs and services of Mather Hospital.

4. MY SIGNATURE and Badge ID # needed to authorize contribution

Sign Name: _____ Badge ID # _____ Date: _____



Please return form to: ljuliano1@northwell.edu
 Or mail to: Mather Hospital, JTM Foundation
 75 North Country Road
 Port Jefferson, NY 11777
 Your contribution is 100% tax deductible
 Make your gift online at www.matherbettertogether.org
 Thank you for your support!



24 pay periods per year*

\$50 over one year = \$2.08 per paycheck

\$130 over one year = \$5.42 per pay check

\$250 over one year = \$10.41 per pay check

\$500 over one year = \$41.67 per paycheck

\$1000 over one year = \$41.67 per paycheck

\$1000 over two years = \$20.83 per paycheck**

\$1000 over three years = \$13.89 per paycheck**

\$2500 over one year = \$104.16 per paycheck

\$2500 over two years = \$52.08 per paycheck**

\$2500 over three years = \$34.72 per paycheck**

26 pay periods per year

\$50 over one year = \$1.93 per paycheck

\$130 over one year = \$5.00 per pay check

\$250 over one year = \$9.62 per pay check

\$500 over one year = \$19.24 per paycheck

\$1000 over one year = \$38.46 per paycheck

\$1000 over two years = \$19.73 per paycheck**

\$1000 over three years = \$12.82 per paycheck**

\$2500 over one year = \$96.15 per paycheck

\$2500 over two years = \$48.07 per paycheck**

\$2500 over three years = \$32.05 per paycheck**

*Beginning in 2023, pay periods for exempt employees will be 24 times/year

**Only gifts of \$1000 or more are eligible for multi year deductions