

Fund information

Greatest Needs

Selecting a Greatest Needs fund provides the flexibility to meet urgent needs and ensures resources are available where they're needed most.

You can designate your gift to the Greatest Needs fund at any of the following locations:

- Memorial Regional Medical Center
- Rappahannock General Hospital
- Richmond Community Hospital
- Richmond Market
- Southern Virginia Medical Center
- Southside Medical Center
- St. Francis Medical Center
- St. Mary's Hospital

You may also use the write-in option to support a specific program or fund that is meaningful to you, such as Noah's Children, Care-A-Van, the Violence Response Team or any other Foundation Fund.

Ministry-wide funds

Caring for Our Own Fund: Provides aid to associates facing financial hardships.

Bon Secours Mercy Health Impact Fund: Impact greatest needs ministry-wide. Your gift will be evenly shared among all Bon Secours Mercy Health Foundation markets.

FAQs

How does my gift impact my community?

Your donations empower the Foundation to support projects and initiatives for our communities, especially aiding our most vulnerable patients. Funds stay local to address pressing needs.

How much should I give?

Please consider a gift at a level that is comfortable and meaningful to you.

What if I donated earlier this year?

If you made a new gift(s) in 2025, your participation is counted toward the Give for Good Campaign, and you may receive Called to Shine points based on your giving. However, consider pledging your 2026 support during this year's campaign.

What if I have an existing ongoing recurring gift?

If your gift from a previous campaign is recurring, there's no need to renew for the 2026 pay cycle. If you are interested in modifying your donation, any changes submitted will replace your current gift.

When are payroll deductions taken?

- One time and PTO – November 2025
- Per Pay Period (Power Hour, Half Hour Hero and Lead for Good included) – Starting January 2026, continuing each 2026 pay period.

Can I donate the value of Paid Time Off (PTO)?

Non-exempt (hourly paid) associates may donate PTO. Exempt (salaried) associates are not eligible to donate PTO due to IRS guidelines.

Scan to make
your gift today!



Thank you for
giving for good!

BON SECOURS MERCY HEALTH
Foundation

GIVEFOR
GOOD

The Power of Us
Associate Giving Campaign

If no envelope provided, mail completed form to:
Bon Secours Richmond Health Care Foundation
2419-Richmond, LBX 632660
P.O. Box 5776
Cincinnati, OH 45273-9942

Questions?

Call 804-287-7700
or email giveforgood@bsmhealth.org

GIVEFOR
GOOD

The Power of Us
Associate Giving Campaign

SEPTEMBER 2025



Dear Associate,

As we prepare for the 2025 Give for Good Campaign, I am inspired by the blessings of your generosity, which strengthens our ministry and brings healing to those we serve.

Save the date for our day of giving, **THE BIG GIVE**, on **August 27**, as we kick off Give for Good 2025.

By directing your gift to the causes that matter most to you, you bridge health care gaps for those most in need.

Giving locally addresses patient care and community needs right here where we work and live. Or choose a ministry-wide fund, such as Caring for Our Own, to uplift associates facing hardships.

Whether you're renewing your previous gift or making a new one, your contribution transforms the lives of others.

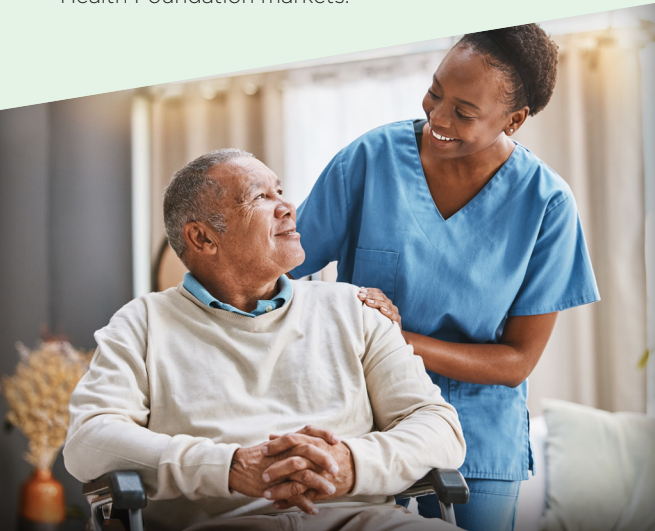
Visit **BSMHgiveforgood.com** to act now and read stories of how you make change with your generosity.

For questions, connect with
giveforgood@bsmhealth.org.

Together, let's Give for Good.

Ann Carpin

Ann Carpin, President
Bon Secours Richmond Health Care Foundation



GIVE FOR GOOD

The Power of Us

Ways to make good happen

- Payroll deductions
- One time gift: credit card, cash or check
- Recurring gift that continues as long as you desire
- Donate paid time off (non-exempt associates)

Current recurring donors

- If your gift from a previous campaign is recurring, there's no need to renew for the 2026 pay cycle. If you are interested in modifying your donation, any changes submitted will replace your current gift.
- You will be eligible for your gift's corresponding 2025 Give for Good incentives.
- Curious if your previous gift was recurring? Email giveforgood@bsmhealth.org to inquire.

Give online at bsmhgiveforgood.com



Giving levels and rewards

Power Hour

- One hour of base-rate pay each pay period in 2026 (example below based on \$15 hourly pay rate)
- 1,200 Called to Shine points

$$\begin{matrix} \$15 \\ \text{1 hour} \end{matrix} \times \begin{matrix} 26 \\ \text{pays} \end{matrix} = \begin{matrix} \$390 \\ \text{total gift} \end{matrix}$$

Half Hour Hero

- Half hour of base-rate pay each pay period in 2026 (example below based on \$15 hourly pay rate)
- 600 Called to Shine points

$$\begin{matrix} \$7.50 \\ \text{0.5 hour} \end{matrix} \times \begin{matrix} 26 \\ \text{pays} \end{matrix} = \begin{matrix} \$196 \\ \text{total gift} \end{matrix}$$

Lead for Good

- \$1,001 per year; only \$38.50 per 2026 pay period
- 1,000 Called to Shine points

THE BIG GIVE donors

- Donors who give on or before 8/27/2025 as **Power Hour, Lead for Good or Half Hour Hero** will be eligible for a free long sleeve shirt
- New donors who set up their gift as recurring on or before 8/27/2025 will receive 500 Called to Shine points

All recurring donors

- A recurring gift with no end date
- 100 Called to Shine points

All donors

- 75 Be Well Points will be awarded

Yes! I want to Give for Good!

Complete an online giving form at bsmhgiveforgood.com or return this form to the Foundation.

Choose a giving level or fill in another amount.*

Payroll deduction

- ☐ **Power Hour** (1 hour per pay starting in 2026*)
Please estimate your hourly pay rate: \$_____
- ☐ **Half Hour Hero** (1/2 hour per pay starting in 2026*)
Please estimate your hourly pay rate: \$_____
- ☐ **Lead for Good** = \$1,001 (\$38.50 per pay starting in 2026*)
- ☐ \$_____ one-time payroll deduction (Taken **Nov. 2025**)
- ☐ \$_____ per pay period (starting in 2026*)

*Your pay period gift will be recurring, meaning it will continue each year, unless you decide to stop or change the amount of your gift. You may opt out of recurring giving below.

☐ **I prefer to opt out of recurring giving; my per pay period gift will stop after 12/31/2026.**

One-time cash gift

- ☐ \$_____ cash/check enclosed
(payable to Bon Secours Mercy Health Foundation)

Credit card gift

- ☐ \$_____ one-time credit card gift
- ☐ VISA ☐ MasterCard ☐ AmEx ☐ Discover
- Name on Credit Card _____
- Card # _____ Exp. Date _____
- If you wish to make a monthly credit card gift, please visit bsmhgiveforgood.com.

PTO donation** (for non-exempt, hourly, associates)

_____ # PTO hours (8 hours minimum donation)

****PTO donations:** I understand the final value of PTO I donate will be reduced by 10% per tax laws and Bon Secours Mercy Health policy, and the remainder will be reported as taxable compensation to which applicable taxes will be applied. The after-tax amount will be the value of my donation and can be reported on my personal tax return as a charitable contribution consistent with IRS guidelines. Deduction will take place in Nov. 2025

My information

Name _____

Associate ID (required) _____

Work email (required) _____

Address _____

City / State / ZIP _____

Mobile phone number _____

Direct my gift to:

(total of all selections must equal 100%)

- | | | |
|---|-------------------------------|---|
| <input type="checkbox"/> Memorial Regional Medical Center Greatest Needs | <input type="text" value=""/> | % |
| <input type="checkbox"/> Rappahannock General Hospital Greatest Needs | <input type="text" value=""/> | % |
| <input type="checkbox"/> Richmond Community Hospital Greatest Needs | <input type="text" value=""/> | % |
| <input type="checkbox"/> Richmond Market Greatest Need | <input type="text" value=""/> | % |
| <input type="checkbox"/> Southern Virginia Medical Center Greatest Needs | <input type="text" value=""/> | % |
| <input type="checkbox"/> Southside Medical Center Greatest Needs | <input type="text" value=""/> | % |
| <input type="checkbox"/> St. Francis Medical Center Greatest Needs | <input type="text" value=""/> | % |
| <input type="checkbox"/> St. Mary's Hospital Greatest Needs | <input type="text" value=""/> | % |
| <input type="checkbox"/> Other (if applicable) | <input type="text" value=""/> | % |

_____ Fund name

Ministry-wide funds:

- | | | |
|--|-------------------------------|---|
| <input type="checkbox"/> Caring for Our Own Fund | <input type="text" value=""/> | % |
| <input type="checkbox"/> Bon Secours Mercy Health Impact Fund | <input type="text" value=""/> | % |

bsmhgiveforgood.com

2419-AP Give for Good - 2025