Adena Health Foundation is supporting Adena’s Emergency Department Expansion by conducting a $3,000,000 capital campaign.

As a commitment to our future, the Foundation is asking caregivers to give for our deserving patients, our dedicated physicians and the health of our entire community.

Adena is leading the region with access to state-of-the-art emergency care. The Emergency Department expansion will nearly triple the size of Adena’s current Emergency Department, growing from 16,500 to 59,000 square feet. By growing, we will be able to handle 19,000 more patient visits each year. With a fundraising goal of $3 million and a total cost of $36.1 million, this major community investment will align us with 21st century practices and give people in our region the emergency experience they deserve and expect for many years to come.

**Leave your mark on our next 150 years of progress!**

Please consider supporting the campaign by donating through payroll deduction, a pledge or gift of cash. Gifts of any size are welcome but gifts of $100 and above will add your name to a donor plaque outside the new ED. Naming opportunities for larger gifts (individual or by department) are also available. To leave your mark, please complete the giving form on the back and return it to the Adena Health Foundation by August 31.
I/We want to Give to Growth by investing in the Emergency Department Capital Campaign.

Name(s): _______________________ Department: ________________ Building: ________

Home Address: ____________________________________________ City: ____________

State: ________ Zip: ________ Email: ___________________ Phone: ____________________

Donor(s): ___________________________________________________________________

Please list name(s) as you wish it (them) to appear in recognition materials.

Suggested Giving Levels: (For Greater Than $10,000 - See Higher Level Giving Form)

- $10,000 See roster for room naming Up to 100 pays
- $5,000 See roster for room naming Up to 100 pays
- $2,500 See roster for special naming Up to 100 pays
- $1,000 Name included on donor wall Up to 50 pays
- $500 Name included on donor wall Up to 50 pays
- $250 Name included on special plaque Up to 25 pays
- $100 Name included on special plaque Up to 20 pays
- $50 Special reward opportunity Up to 10 pays
- $25 No reward or naming Up to 5 pays
- $10 No reward or naming Up to 2 pays

Caregiver Donation/Pledge Form

☐ Payroll Deduct: $ _________  # of Pays: ___  Employee ID: _________

Authorized Signature: ___________________________ Date: __/__/____

☐ Cash  ☐ Check#: _________  ☐ Credit Card #: ________________________________

Expiration Date: ___/___ CVC: ___________________

Card Holder Name: _____________________________

Card Holder Signature: _________________________

Date: ___/___/___

Contact Sheila Buckley at 740-779-8718, sbuckley@adena.org with questions.

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