



"I think it's important to remember that there are different definitions of 'rural'. It can mean more than geography, especially to those who live there — it's a way of life, of communicating, of understanding information."

— Mary Maruscak, Director, Community Health Education

Creating a New Center for Rural Health Service, Innovation and Learning

Giving Options

HOW TO GIVE

Gifts to our Capital Campaign can be accepted from individuals, businesses, or groups through a one-time donation or recurring donations or pledge made for up to three years. You can make a gift in any amount and in a way that fits your budget.

WAYS TO GIVE

Gifts of cash paid via check can be mailed to Rural Health Network of SCNY, 455 Court Street, Binghamton, NY 13904. The quickest and easiest way to set up a recurring donation is to visit our online donation portal at www.rhnsncy.org. You can set frequency to one-time, monthly, quarterly, semiannually, or annually. If you prefer to be invoiced for future pledge payments, complete the enclosed pledge card.

Matching Gifts – Individuals may have the potential to increase their gift with the help of their employer. Many companies encourage giving to non-profit organizations through matching gift programs. Programs vary, so please check with your employer.

Memorial & Tribute Gifts – Making a charitable gift in memory or honor of one you admire, respect, or love is a wonderful way to celebrate their life and accomplishments.

Gifts of Securities – Gifts of stocks or bonds to Rural Health Network can be beneficial to you as a donor as well as to our mission. A charitable deduction may be allowed, please consult your tax advisor.

Retirement Assets – You can share the benefits of your accumulated retirement assets by making cash gifts to Rural Health Network from your retirement assets, which could include gifting a Required Minimum Distribution. Consult your tax advisor or www.irs.gov for information about Retirement Plan and IRA Required Minimum Distributions.

GIVING LEVELS

Friend	Up to \$99
Supporter	\$100-\$499
Builder	\$500-\$2,499
Innovator	\$2,500-\$4,999
Champion	\$5,000-\$24,999
Leader	\$25,000-\$74,999
Visionary	\$75,000+

For more information about giving options or possible naming opportunities, please contact Cindy Martin, Director of Resource Development at 607-692-7669, ext. 203 or cmartin@rhnsncy.org.

Rural Health Network of SCNY, Inc. is a 501(c)(3) charity registered with the New York State Charities Bureau. Our most recent financial statements are available for review at www.charitiesnys.com.

**RURAL HEALTH
NETWORK**
Serving South Central New York



Donation/Pledge Form

DONOR INFORMATION

Name: _____

Business/Organization* (optional): _____

Address: _____

City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

**If this donation/pledge is being made on behalf of a business, organization, or group, please indicate as appropriate.*

MULTI INSTALLMENT PLEDGE (up to three years)

- I/We wish to make a gift over time as follows:
 - Installment Frequency (select one):
 - Annually Semi-annually
 - Quarterly Monthly
 - Pledge Period: 3 years 2 years 1 year
 - Pledge Installment amount: \$ _____
 - Pledge Start Date _____ End Date _____
 - Total Pledge: \$ _____
- I/We will schedule a payment online at www.rhnsncy.org. Rural Health Network uses a secure payment processor to accept credit, debit, or electronic ACH payments.
- My/Our first payment of \$ _____ is enclosed.
- Please send me reminders for future payments.

ONE-TIME GIFT

- I/We would like to make a gift of \$ _____ to support the Rural Health Network Capital Campaign.
- My/Our gift is enclosed.
- I/We will make a payment online at www.rhnsncy.org. Rural Health Network uses a secure payment processor to accept credit, debit, or electronic ACH payments.

Make checks payable to Rural Health Network of SCNY.

Contact Rural Health Network if you'd like more information about making gifts of securities or retirement assets.

Rural Health Network will acknowledge donations/pledges upon receipt and also send contribution statements by January 15th for the prior calendar year.

ACKNOWLEDGEMENT

Please print how you would like your name(s) acknowledged: _____

- My/Our gift is in memory or honor of: _____
- I/We prefer to remain anonymous.
- Please contact me to discuss other giving options and/or possible naming opportunities.
- I'd like to stay informed, please add me to your e-news list.

MATCHING GIFTS

- I anticipate my gift will be matched by (specify company) _____

PLEASE MAIL THIS PLEDGE FORM AND OPTIONAL PAYMENT TO:

Rural Health Network of SCNY, 455 Court Street, Binghamton, NY 13904

Rural Health Network of SCNY, Inc. is recognized by the IRS as a 501(c)(3) public charity. As such, all donations are tax deductible to the extent allowed by law.