



# Together we shine.

2026 Annual Appeal



## Non-Employee Contractor Information

\* Full Name: \_\_\_\_\_ \* Employee ID: \_\_\_\_\_  
\* Work Location: \_\_\_\_\_ \* Department: \_\_\_\_\_  
\* Work Email: \_\_\_\_\_ Mobile Phone: \_\_\_\_\_  
\* Home Address: \_\_\_\_\_ \* City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
Birthdate (mm/dd): \_\_\_\_\_ *\*indicates a required field*

☐ I would like my gift to remain anonymous.

## I would like to donate...

### ☐ Cash or Check

Return your check or cash, with this completed form (make checks out to CHI Health Schuyler Foundation), to the foundation office.

Donation Amount: \$ \_\_\_\_\_

### ☐ Credit/Debit Card

To make a one-time gift, or set up a recurring credit/debit card donation (processed on the 10<sup>th</sup> of each month, or every other Friday), please visit our online form at [Give.chihealth.com/SchuylerAnnual](http://Give.chihealth.com/SchuylerAnnual)

## I would like my gift to support...

- ☐ **Capital Excellence:** Funds will be used to support improvement projects, capital improvements or other capital hospital priorities. A 3-D mammography unit and ED crash carts are the types of patient-centric projects that donor support has helped move forward at our hospital.
- ☐ **Other:** (write in your choice): \_\_\_\_\_



Scan this code  
to make  
your donation  
online!

**Thank you for your support! Please return forms to:**  
CHI Health Schuyler Foundation  
104 W 17<sup>th</sup> St, Schuyler, NE 68661-1304  
Questions? Contact Claudia Lanuza  
(402) 352-4075 or [Claudia.Lanuza@CommonSpirit.org](mailto:Claudia.Lanuza@CommonSpirit.org)