

Thank you for making a Wish List donation to St. Elizabeth Healthcare! To ensure your donation is recorded and acknowledged by St. Elizabeth, please complete the below form and print three copies.

Completed forms, along with your donation, should be delivered to the Main Entrance Information Desk at St. Elizabeth Edgewood, Florence or Ft. Thomas hospitals. *Be sure to retain a copy for your records!*

Name: \_\_\_\_\_

Date: \_\_\_\_\_

Organization (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

City, State Zip Code: \_\_\_\_\_

Phone Number: \_\_\_\_\_

Description of items: \_\_\_\_\_

Number of items: \_\_\_\_\_

Number of persons responsible for creating items: \_\_\_\_\_

Number of hours spent creating items: \_\_\_\_\_

Value of donation including materials and your time\*: \_\_\_\_\_

Additional Comments:

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\* It is important for St. Elizabeth Healthcare to track the value of non-monetary donations. You will also receive an acknowledgement of your donation for tax purposes.

## Donated Item(s) Form

### *For Staff Use Only*

Please send a copy of this form to: Volunteer Services, Receiving Department and Foundation.

#### Donation delivered to:

- Edgewood
- Florence
- Ft. Thomas

#### Donation intended for:

- Behavioral Health
- Cancer Care
- General Patient and Family Needs
- Hospice
- Indigent Patients
- Inpatient Unit Activity Boxes
- Maternal Child
- Neonatal Intensive Care / Family Birth Place
- Pastoral Care

Donation logged in Volgistics: \_\_\_\_\_

Received by:

\_\_\_\_\_  
Volunteer Services

\_\_\_\_\_  
Foundation Office