

# Special Funded Effort

## PTO or Cash Donation

### 1. My Employee Information

My Name: \_\_\_\_\_ Employee ID#: \_\_\_\_\_

### 2. Name of the Co-Worker Whom My Gift Will Help:

\_\_\_\_\_  
(Please Print)

### 3. My Special Funded Effort PTO Gift

(Please route signed form to Caring Coworkers Fund Representative Jennifer Cody-Wickstrom or Rachel Reis)

Please deduct \_\_\_\_\_ PTO hours from my PTO account.

**If you participate in the MHS 401(k) [pre-tax and/or Roth], your regular deduction(s) will be taken from your sell-back. If you do not want your regular deduction(s) to be taken, please indicate your choice below:**

I authorize a change to my MHS 401(k) Retirement Plan elected amount(s) for this sell-back only:

Pre-tax 401(k) Percent \_\_\_\_\_%

Roth 401(k) Percent \_\_\_\_\_%

I do not wish to have a NMHS 401(k) Retirement Plan deduction from this sell-back (will apply to both pre-tax and Roth).

Maximum deferral is 88% of the value of the sell-back.  
Deductions are subject to the annual plan contribution limits.

OR *\*Questions regarding the MHS 401(k) [pre-tax and/or Roth] electives should be directed to the Human Resources Service Center either through the People Portal or by phone at ext. 4-2280*

### 4. My Special Funded Effort Cash Gift of \$ \_\_\_\_\_

(Please route signed form to the Caring Coworkers Fund Representative)

### 5. My Authorization (Required) \*

I authorize Methodist Jennie Edmundson Hospital Foundation and Nebraska Methodist Health System Finance office to make the above noted change to my PTO account.

*I understand that my donation will be available **for one year** to help this employee. After one year, any unused funds will transfer to the Caring Coworkers Fund Grant program, in order to help other employees in need.*

\_\_\_\_\_  
Employee Signature

\_\_\_\_\_  
Date

**\* The Employee's signature is required to authorize any changes.**



#### FOR OFFICE USE ONLY

- \_\_\_ Copy sent to HR – PTO gifts
- \_\_\_ FCC Spreadsheet updated
- \_\_\_ Check from Finance for PTO gifts deposited
- \_\_\_ Gift receipted in RE and letter sent to donor
- \_\_\_ Completed