



**METHODIST
JENNIE EDMUNDSON
CARDIOVASCULAR SERVICES**



**JENNIE EDMUNDSON
FOUNDATION**

Dance TO THE BEAT



A CONCERT FUNDRAISER TO BENEFIT CARDIOVASCULAR PATIENTS
AT METHODIST JENNIE EDMUNDSON HOSPITAL

Saturday, February 10th ♥ 7:00pm to 11:00pm

Corpus Christi Parish Activity Center

3304 4th Ave, Council Bluffs (formerly known as Queen of Apostles)

hosted by **The Heart Care Center & Dr. Tom and Becky Brandt**

TICKETS - ~~\$30~~ each
\$25 employee discount!

I would like to purchase ___ tickets at the
employee discounted price of \$25 per ticket.

Total Due: _____

Name _____

Address _____

City _____ State _____ Zip _____

Phone Number _____

Payment: Check payable to Jennie Edmundson Foundation

Payroll Deduction (please circle # of paychecks) 1 2 3

Employee ID# _____ Department _____

By my signature below, I authorize Methodist Jennie Edmundson to deduct payments from my paycheck for the total amount indicated above for the purpose of payment to "Jennie Edmundson Foundation" until the amount is repaid. If my employment is terminated prior to repaying the total amount, this is further authorization to withhold the unpaid balance from my final paycheck.

Employee Signature _____ Date _____

Cash

Credit Card (please stop up to third floor/volunteer services to pay)