



# Dance TO THE BEAT



**METHODIST**  
**JENNIE EDMUNDSON**  
CARDIOVASCULAR SERVICES



**JENNIE EDMUNDSON**  
**FOUNDATION**

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

**Saturday, February 23rd ♥ 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 (Must purchase by February 15th to receive discount)

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)