

UHS Foundation Donation Form
367 South Gulph Road | P.O. Box 61558 | King of Prussia, PA 19406-0958

PERSONAL CHECK CONTRIBUTION

I pledge to contribute \$_____ by check payable to the "UHS Foundation". Please complete the Required Personal Information below and send this form and your check to:

UHS Foundation
Attention Marsia Moscia, Treasury Dept.,
P.O. Box 61558
King of Prussia, PA 19406-0958.

Please do not send cash.

Required Personal Information to Receive a Receipt for Tax Purposes:

Full Name:

Address:

Are you a UHS employee:

If yes, what facility or location?

Signature:

Date:

THANK YOU FOR YOUR SUPPORT!

On behalf of the Universal Health Services Foundation, I would like to extend our gratitude to you for your generous contribution. Donations to the Foundation are used to directly benefit employees of Universal Health Services and its facilities who have suffered losses from disasters and applied for assistance. No goods or services were provided by the donor organization in return for payment Universal Health Services Foundation Federal ID # 20-3396995

Sincerely,

**Alan B. Miller Chairman
Founder, Chairman & CEO
Universal Health Services**