

Saint Mary's Hospital

# Recognize a Star PROGRAM

## A Giving Program to Honor Your Caregiver



Dear Friends,

On a daily basis, we receive praise from our patients about the everyday "stars" at Saint Mary's Hospital who have transformed their lives. As a recent recipient of our services, we invite you to say "thank you" to the physician, therapist, nurse or colleague who has touched your life and made your future brighter. With a gift of \$100 or greater, your name and the name of your caregiver will be proudly displayed on a plaque prominently hung in the hospital.

Our grateful patients and their families are among our most precious resources, and your story is a reminder of our important healing Mission. We hope you will use the attached form to tell us about your experience. Your story will mean a great deal to our caregivers and those who may be considering Saint Mary's Hospital as their destination for care.

Thank you for choosing Saint Mary's Hospital, and I look forward to hearing from you.

Sincerely,

Steven Schneider, M.D., M.B.A.  
President  
Saint Mary's Hospital

### Here's what our grateful patients are saying...

"Overall, the experience, apart from the medical issues, was wonderful. In particular, the nurses both individually and as a group were extraordinary.

They were professional, supportive and very kind.

All of them!"

"I had a great experience. Everyone involved in my care treated me with the most respect, dignity and care I have ever received."



Saint Mary's Hospital  
Trinity Health

**My gift is in appreciation of:**

Caregiver name \_\_\_\_\_

Unit/Department \_\_\_\_\_

I would like to donate:

- \$1,000       \$100
- \$500         Other \$ \_\_\_\_\_
- \$250

**Donor Information**

Name \_\_\_\_\_

Home Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_ (cell or home)

Email \_\_\_\_\_

- My Grateful Patient Story is enclosed (use reverse side of this card if desired).
- Donate online at [stmhfoundation.org](http://stmhfoundation.org)
- My check for \$\_\_\_\_\_ is enclosed  
Make checks payable to Saint Mary's Hospital Foundation
- Please charge my:  
MasterCard/Visa/American Express

CC# \_\_\_\_\_ Exp. date \_\_\_\_\_

Signature \_\_\_\_\_ SEC \_\_\_\_\_

I am interested in:

- Volunteering                       Leaving a planned gift
- Hosting a fundraiser              to Saint Mary's

Questions? 203-709-6390

To opt-out, please call the number above to be removed from our fundraising mailing lists. All gifts are tax-deductible.

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Saint Mary's Hospital Foundation  
 Gift Processing Center  
 P.O. Box 320635  
 Hartford, CT 06132-9901  
[www.stmhfoundation.org](http://www.stmhfoundation.org)

**OUR MISSION**

We, Trinity Health, serve together in the spirit of the Gospel as a compassionate and transforming healing presence within our communities.



**Saint Mary's Hospital**  
 Trinity Health

**OUR CORE VALUES**

**Reverence**  
 We honor the sacredness and dignity of every person.

**Commitment to Those Who are Poor**  
 We stand with and serve those who are poor, especially those most vulnerable.

**Safety**  
 We embrace a culture that prevents harm and nurtures a healing, safe environment for all.

**Justice**  
 We foster right relationships to promote the common good, including sustainability of Earth.

**Stewardship**  
 We honor our heritage and hold ourselves accountable for the human, financial and natural resources entrusted to our care.

**Integrity**  
 We are faithful to who we say we are