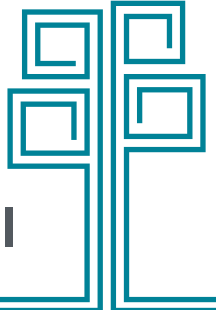


As a not-for-profit family of agencies, we rely on the generosity and support of individuals, corporations and foundations to ensure care to all patients, regardless of their ability to pay. Charitable donations help us provide quality home care and hospice services for patients and families most in need. Your donation is a gift of lasting benefit to thousands of people every day.

Support

Quality Care for All



Please print or email this donation form and mail to:

Home Health Foundation
360 Merrimack Street, Suite 425
Lawrence, MA 01843

My information

Name _____
Company/Organization _____
Address _____
City/State/Zip _____
Phone _____
Email _____

- I give the agency permission to contact me by email
- I am enclosing my employer's matching gift form

Tribute Gift Information

If donation is made in memory or in honor of a friend or family member, please list their name here:

name _____

Please include name and address of person to notify that a gift was made in memory or tribute to them.

name _____
address _____

I AM SUPPORTING

- Home Health Care
- Hospice Care
- Supportive Services
- High Pointe House
- Where Needed Most



DONATION AMOUNT

All donations of \$100 or more, as well as those named in memorial/tribute are published in our Annual Report.

- \$1000
- \$500
- \$250
- \$200
- \$50
- \$25
- Other



Payment information

- I am paying by check; payable to the agency of my choice
- Please bill my credit card (choose one)
 - VISA Mastercard AMEX Discover

Card# _____ | _____ | _____ | _____ Exp date _____
PIN _____

All donations are tax deductible to the extent allowed by law. Every gift received is acknowledged by a letter. For memorial and honor gifts, if all information is provided, notification will be sent promptly.