



Nebraska Health Care Foundation



Thank you for your interest in making a financial contribution or donating equipment or supplies to the Nebraska Health Care Foundation's Growing for Learning Campaign. Your willingness to contribute to this important project is appreciated and will help the Foundation in its work to provide high quality training to Nebraska's long term care professionals.

Contributing organization (as you would like it to appear on campaign recognition materials)

Contact name

Address City State Zip

Phone Email

My organization would like to make the following tax-deductible donation: [] Cash [] Equipment/Supplies

CASH CONTRIBUTION

Enclosed is my financial contribution in the amount of:

\$500 \$1,000 \$2,500 \$5,000 \$10,000 Other: (specify)

Make checks payable to: Nebraska Health Care Foundation (Federal Tax ID #36-3573679)

or pay by credit card using this form:

VISA MasterCard Discover American Express

Cardholder's Name (please print)

Cardholder's Billing Address, City, State, Zip

Credit Card # Expiration Date

Your signature here will authorize this transaction

or, pay securely www.nehca.org/nhcf

SUPPLIES OR EQUIPMENT DONATION (View an up-to-date list of equipment needs at www.nehca.org/nhcf) Provide a description of the supplies/equipment (complete a form for each item). Include brand, model, quantity, size, etc.

Blank lines for describing equipment donations

Please send a photo of medium to large equipment donations to septembers@nehca.org.

Fair market value of item: \$

Equipment and supply donations are subject to review and acceptance by the administrator of the Nebraska Health Care Learning Center. While all donations on the needs list are appreciated, supplies and equipment must be new or of an acceptable condition.