

To make a contribution to the Annual Appeal, please print out and fill in the form below. Mail it with your check or money order to: Newfound Area Nursing Association (or NANA), 214 Lake Street, Bristol, NH 03222.

Thank you for your support of our programs!

Please note name & address:

Yes, I/we want to help NANA continue to provide comprehensive, compassionate care.

\$500 \$250 \$100 \$50 \$25 Other _____

Please make all contributions payable to Newfound Area Nursing Association, Inc. Your gift may be tax-deductible

This gift is:

Please list my/our names(s) in NANA publications.

Please list my/our gift as anonymous

In memory of: _____

In honor of: _____

Address of family member

WEB
