

## **Central Community Hospital Foundation**

**Mission Statement:** The Central Community Hospital Foundation's mission is to raise charitable contributions to promote and support the health of the community through MercyOne Elkader Medical Center.

## **Donation Form**

To donate, print this form and mail it with your donation to the address below.

Name:		
City/State/Zip:		
Phone: ( <u>)</u>	E-mail Address:	(We do not share this information)
Gift Amount: \$(Please make check	payable to Central Commun	nity Hospital Foundation)
Signature of Donor:		
Gift Designation:	☐ Area of Greatest Need	□ Other:
In Memory or Hono	r of:	
If you would like not name and address:	tification sent regarding your	r memorial/honor designation, please provid
in my will or estate.	more information on how to	mber Central Community Hospital Foundation