

*The philosophy of the Office for the Aging is for older residents of Lewis County to live independently and secure in their homes for as long as possible.*

*In these days of funding uncertainty for elderly programs and services, your memorial contribution is greatly appreciated.*

*Your contributions stay here in Lewis County and grant stability to needed programs.  
Thank you for the opportunity to make the dream of independence and security grow.*

Please detach and include the bottom portion with your contribution.

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**Enclosed is my gift to the Lewis County Office for the Aging, in the sum of \$ \_\_\_\_\_**

**\_\_\_ in memory of \_\_\_\_\_**

**\_\_\_ in honor of \_\_\_\_\_**

**Please use my gift:**

- |  |  |
|--|--|
| <input type="checkbox"/> Where it is needed most | <input type="checkbox"/> Insurance Counseling                |
| <input type="checkbox"/> Home Delivered Meals    | <input type="checkbox"/> Ombudsman                           |
| <input type="checkbox"/> Congregate Meals        | <input type="checkbox"/> WRAP                                |
| <input type="checkbox"/> EISEP (In-Home Care)    | <input type="checkbox"/> Special Events (Picnic, Fair, etc.) |
| <input type="checkbox"/> Transportation          | <input type="checkbox"/> Legal Services                      |

**My name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

*Please makes checks payable to the Lewis County Office for the Aging.  
You will receive a receipt for your tax-deductible gift.*