

CLOUD COUNTY FOUNDATION FOR HEALTH

History

Cloud County Foundation for Health Care, Inc. is a separate legal entity from Cloud County Health Center. The Foundation is a qualified 501(c)(3) charitable organization.

The Foundation was created in 1983 to secure and dispense financial aid for the operation, maintenance and expansion of facilities and services of Cloud County Health Center and to other wise contribute to the health care and maintenance of the people of North Central Kansas.

The Foundation has provided funds to the hospital over the years in support of a wide range of needs. Some of the projects are as follows:

- CT scanner
- Physician Recruitment
- Computers
- Mammography Unit
- Ultrasound
- Endoscopes for Surgery
- Large Air Conditioning Chiller
- Heart Monitor, Defibrillator, & Pacemaker

Making a Donation

Donations / Contributions can be given as follows:

Restricted Gifts

Donors may restrict their gifts to a specific medical service, project, construction, or specific piece of equipment.

Unrestricted Gifts

Through this gift, the donor allows the Foundation the flexibility for using the funds to meet urgent needs or to invest them for the future.

Endowed Fund Gifts

An Endowed Fund only allows for the earnings from the endowed funds to be utilized. Endowments can be restricted to a specific purpose or given to the general fund that can be used for urgent needs or to invest in the future.

Tax Benefits

Donations to a 501(c)(3) charitable organization may be tax deductible.

Cloud County Foundation for Health Care is a member of the Community Foundation for Cloud County. Donations may be made to that organization on behalf of Cloud County Foundation for Health Care.

Cloud County Foundation for Health Care

◇ Yes, I want to help Cloud County Health Center be the best facility that it can possibly be!

My gift to the Cloud County Foundation for Health Care is enclosed.

___ \$25 ___ \$50
___ \$100 ___ \$1,000
\$_____ Other

I would like my gift to be used for:

- Wherever the need is greatest
- Capital Equipment
- Other _____
- This gift is in Honor of:
- This gift is in Memory of:

Name

This is a gift from

Your Name

Address

City, State, Zip

Telephone

Thank you for your support!