



*Our patients
are grateful for.....*

- The skill of a doctor
- The compassion of a nurse
- The help and expertise of a caring staff member
- The thoughtfulness of a volunteer



**How can you say thank you?
Make a gift today.**

At the Nathan Littauer Foundation,
we are committed to carrying on
fund raising and related activities
to support the mission of
Nathan Littauer Hospital and
Nursing Home.



Nathan Littauer Foundation
99 East State Street
Gloversville, NY 12078
(518) 773-5505

www.nlh.org



NATHAN LITTAUER'S
Grateful Patient
Program

WE ARE GRATEFUL THAT YOU CHOSE LITTAUER



We hope you are grateful for the service
that you or your loved one received



Delivering patient-centered care is our highest priority.

Sometimes, “thank you” isn’t enough to show your appreciation for the caliber of exceptional care provided to you or a family member while a patient at Nathan Littauer Hospital. *The Grateful Patient Program* was created to provide you with an opportunity to identify excellence and show your appreciation in a meaningful way.

What better way to show your appreciation than by making a donation in recognition of a job well done. Your gift helps ensure that the same level of compassionate, high-quality care that you or your loved one received at Littauer will remain available today and for generations to come.

The impact of your gratitude is profound.

Your gift can help change lives!

Yes! I am grateful!

I want to support Nathan Littauer’s high-quality, compassionate, patient-centered healthcare system.

(Please Print)

Name(s): _____

Address: _____

City: _____

State, Zip: _____

Please print your name as you wish to be recognized:

Gift is in memory of/ in honor of

Acknowledge my gift to:

Name(s): _____

Address: _____

City/State/Zip: _____

My check payable to the **Nathan Littauer Foundation** is enclosed

MC Visa Discover American Express

Account Number: _____

Exp. Date: _____

Signature: _____

Please remove my name from your mailing list.

Even if you can’t make a donation today, please share your experience with us. We will be sure to forward it on to the highlighted doctor, staff member, volunteer, or department.

TO: (Doctor, Littauer staff member, unit or department name):

MESSAGE:

YOUR NAME AND ADDRESS (optional):

Thank you for sharing... For caring.

Thank you for choosing **LITTAUER**.