

YOUR DONATIONS HELP!

Three (3) great opportunities to advance Adult Day Services!

Revised 11/29/2018

CAADS | State Advocacy Fund



Your donation to the **CAADS State Advocacy Fund** enhances CAADS' advocacy efforts, which have been successful in keeping our programs alive and visible to state, federal and local policy makers. Membership dues alone do not fully cover the costs of lobbying and advocacy, therefore, we continue to raise funds to work on your behalf by responding to calls for stakeholder input; writing papers; and meeting with key members of the

Administration and Legislature.

YES, please accept this voluntary:

CONTRIBUTION. Enclosed is: \$_____ *Please make checks payable to: CAADS*

PLEDGE (and contact me about a payment schedule) for a total donation of: \$_____

*Contributions to CAADS State Advocacy Fund are **NOT** tax deductible.*

CAADS | New Improved Website Fund



After 40 exciting years of leadership and growth, it's time to update CAADS website to reflect today's modern centers as public awareness of our programs grows. Help CAADS launch a new improved website for members and the public alike! A recent survey shows that CAADS website content is valued but the user experience needs improvement. We're more a than quarter of the way toward our \$26,000 goal. Any donation small or large is appreciated!

YES, please accept this voluntary:

CONTRIBUTION. Enclosed is: \$_____ *Please make checks payable to: CAADS*

PLEDGE (and contact me about a payment schedule) for a total donation of: \$_____

*Contributions to CAADS New Improved Website Fund are **NOT** tax deductible.*

ALE | Nina M. Nolcox Scholarship Fund



The Alliance for Leadership and Education (ALE), a subsidiary of CAADS, created the **Nina M. Nolcox Scholarship Fund** to recognize nursing leadership, dedication and passion for community based nursing within adult day services as exemplified by the late Nina Nolcox, RN, PHN. Nina served as President of CAADS from 2012 – 2014.

YES, please accept this voluntary:

CONTRIBUTION. Enclosed is: \$_____ *Please make checks payable to: ALE*

PLEDGE (and contact me about a payment schedule) for a total donation of: \$_____

*Contributions to ALE Nina M. Nolcox Scholarship Fund **ARE** tax deductible.*

DONOR CONTACT & PAYMENT INFORMATION

This is my **PERSONAL** pledge/donation.

This is my **ORGANIZATION'S** pledge/donation.

First & Last Name: _____ Organization: _____

Tel: (_____) _____ Email: _____

PAID BY: **Check**

MasterCard (credit or debit card)

Visa (credit or debit card)

Discover (credit card)

American Express (credit card)

Account #: _____ Expiration Date: ____ / ____

C V V Code: ____ Cardholder Name: _____

Cardholder Street Address: _____ Zip: _____

Cardholder Signature: _____

MAIL TO: CAADS / ALE, 1107 9th Street, Suite 701, Sacramento, CA 95814 | FAX TO: 1-866-725-3123