SERTOMA
Speech & Hearing Foundation of Florida, Inc.

HEARING AID DONATIONS

We greatly appreciate your generous donation which will give the gift of better hearing to someone in need. Thank you!

Please complete the information below so we can send you a note of thanks.

Name: _____ Phone: _____

Address: _____

City: _____State:_____ Zip:_____

Email: _____ Number of Hearing Aids:_____

THIS DONATION IS...

☐ In memory of _____

☐ In honor of_____

☐ Valued at $_____

Please ONLY send hearing aids and unopened, unexpired hearing aid batteries. DO NOT send cases, booklets, etc. Please mail this form, keeping a copy for your records, and your generous donation(s) to the address listed below:

SERTOMA SPEECH & HEARING FOUNDATION
Attention: Clinic
5211 US Hwy 19, Ste 200
New Port Richey, FL 34652

EIN: 59-2182519 www.sertomashf.org
Phone: 727-312-3881 Fax: 727-807-6172 Email: info@sertomashf.org