

TAKE A CHANCE, CHANGE A LIFE



MERCEDES MOMENT

TO BENEFIT ALL PROGRAMS & SERVICES OF HOME NURSING AGENCY

THURSDAY, MAY 19, 2016

**Win a 2016 Mercedes CLA250 4MATIC Coupe
or a \$30,000 cash prize!*** *(*Taxes not included.)*

*The 2016 Mercedes CLA250 4MATIC is a classy coupe featuring:
208hp, 2.0L turbo-4, 6.9 second acceleration (0 to 60+).*

Only \$100 a ticket!

Home Nursing Agency's Foundation proudly presents the 2016 Mercedes Moment fundraiser, which supports charitable needs through our in-home and community-based services.

The Mercedes drawing is based on the first 3-digit PA lottery on Thursday, May 19, 2016 at 7 p.m. Only 1,000 tickets are sold and the event sells out every year, so be sure to buy your ticket today! Tickets are only \$100 each.

To reserve your tickets, please complete the ticket order form on the reverse side and return it to:

Home Nursing Agency Foundation, 201 Chestnut Avenue, Altoona, PA 16601

Call the Mercedes Moment Hotline **1-855-GIVE-HNA** or email foundation@homenursingagency.com.

Ticket numbers will be distributed on a first-come, first-serve basis. Specific number requests will be taken but cannot be guaranteed. Actual tickets will be mailed to you.



*We can't guarantee your ticket
will win a Mercedes
but we CAN guarantee your
support will change a life!*



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Yes! Please reserve my ticket(s) to win a new 2016 Mercedes!
 Contact information – Please print clearly.

STEP ONE

Name _____

Street _____

City _____ State _____ Zip _____

Daytime Phone _____ Evening Phone _____

Email Address _____

STEP TWO

Number of Tickets	Total Cost
_____	\$ _____
x \$100 Per Ticket	

If you would like a specific 3-digit number, please list your top three choices:
 Note: If each of your top three choices has been sold, you will be given a random number. Sorry, no numbers can be guaranteed.

STEP THREE

I have enclosed a (please circle one): check / cash / money order
 (Please make checks payable to Home Nursing Agency Foundation)

Please charge my (please circle one): Visa Master Card

Name on Card _____

Card Number _____ Expiration Date _____

Cardholder's Signature _____

Please return this form to:
Home Nursing Agency Foundation
201 Chestnut Avenue, PO Box 352, Altoona, PA 16603-0352

**Your ticket(s) will be mailed to you. Questions? Contact Home Nursing Agency Foundation at:
 1-855-GIVE-HNA (1-855-448-3462) or foundation@homenursingagency.com**

Price of ticket is not tax deductible. • Winner may choose \$30,000 cash prize in lieu of car. • Winning number will be determined by the first drawing if a "Surprise Second" drawing occurs. • Players must be 18 years or older.

The official registration and financial information of Home Nursing Agency may be obtained from the Pennsylvania Department of State by calling toll-free, within Pennsylvania 1-800-732-0999. Registration does not imply endorsement. To be removed from our mailing list, please contact Home Nursing Agency at 1-800-992-2554.