

**Application for Advertising - Northeast Ohio Long Term Care Planning Guide
on www.longtermcareohio.com:**

Facility Listing Information

\$299.00/yr-

Contact Person _____ **Title** _____

Facility/Company/Business Name _____

Living Options - **Independent** **Congregate** **Assisted** **RCF** **Nursing**

Address _____

City _____ **State** _____ **Zip** _____ **Phone ()** _____

County _____

Specialty of the Facility _____

Web site address _____ **Fax ()** _____

Other Information: _____

**Our mailing address is;
188 Brush Rd
Richmond Heights, OH 44143
Please make check payable to www.longtermcareohio.com, Ltd.
For questions, our email address is ltcoho@att.net**