

Dear Friend,

Thank you for your interest in our assisted living facility, the Abrams Residence. Our residents are individuals who cherish their independence, but who have reached a time in their lives when they need or desire assistance with activities of daily living.

I have enclosed a brochure describing the Abrams Residence and the services we offer. Also included are an application, health questionnaire to be completed by your physician, and a financial information form.

The decision to move to a new residence can be very stressful. Our staff is here to help ease this process in any way we can. Please call me at (609) 883-5391, Ext 305 for additional information or a personal tour.

Sincerely,

Richard Goldstein

Richard Goldstein Executive Director

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Greenwood skilled nursing assisted Li homecare services rehabilit hospice care kosher meals on	TATION	<u>Abrams Resi</u> <u>Assisted Li</u> Application for	ving	Greenwoo	mplete and od House Street, Ewing		
1. Name:		Marital St	atus: 🗆 Single 🛛	□ Married □	Divorced E] Widowed	
2. Present Address:	Street		City	,	State	Zip	
Telephone:		Years at Present Ad	dress:	Religion:		·	
If Less Than 2 Years, Previous	s Address						
4. Date of Birth A	\ge Sex	Birthplace		_Occupatior	ו		
5. Medicare #	Social Security#			_Medicaid#_			
Other Insurance (Name)			Pol	icy #			
Group #	Subscriber			Phone #			
Name & Address of Spouse	(if Living)						
6. With Whom Are You Now Living? Name				Relationship _			
Street		City	State Zip) F	Iome Phone #		
7. Names and Addresses of	Primary Conto	acts:					
1) Name:		Re	elationship:				
Street		City	State Zip) H	lome Phone #		
Cell Phone #		Work Phone #		Email Address	S		
2) Name:		Re	elationship:				
Street		City	State Zip)	lome Phone #		
Cell Phone #		Work Phone #		Email Addres	s		
3) Name:			elationship:				
Street		City	State Zip) F	Iome Phone #		
Cell Phone #		Work Phone #		Email Address	S		
10. Has a durable Power of	Attorney beer	n designated? 🗖 Ye	s 🗖 No				
If yes, name of desig	nee		Pł	none #			
11. Has a durable Financial	Power of Atto	rney been designate	ed? 🛛 Yes 🗖 N	0			
If yes, name of desig	gnee		F	hone #			

12. Has a durable N	1edical Power of A	ttorney been designat	ted? 🛛 Yes 🗖 No				
lf yes, name	of designee		Phone #				
ASSETS:							
Name & Address of	Bank:			Balance:			
Account:	🗆 Single 🗖 Joir	nt -	Type: 🛛 Checking	g 🗖 Savings			
Name of Bank:				Balance:			
Account:	🗆 Single 🗖 Joir	nt -	Type: 🛛 Checking	g 🗖 Savings			
Stocks & Bonds:							
Name:		Estimate	ed Value:	🛛 Single	🛛 Joint		
Name:	lame:		Estimated Value:		🛛 Joint		
Name:	ame:		Estimated Value:		🛛 Joint		
<u>Real Estate</u> :							
1) Property Address	5:						
Estimated Value:		Single D Joint	ls property curren	ntly on the market?] Yes 🗖 No		
2) Property Address		0	,				
Other assets (please	e describe and wh	ether ownership is sing		L ASSETS: \$			
Liabilities (Please de	escribe):		TOTAL LIABILITIES: \$				
Income (Monthly):							
Social Security: \$		Annuities: \$	Int	Interest Dividends: \$			
Pension: \$	Other: \$	Other: \$	Total Mont	hly Income: \$			
			In 2 Years?				
		ation. A nonrefundable \$1 eposit, which can be app					
Applicant's Signatu	re		Date				
Signature of respon	sible party		Relationsh	nip to applicant			
		t is complete and corre					
Signature of Applicant		Date	Signature of person completing for	orm for applicant	Date		
		ABRAMS RES					
		50 Walter Street, Ew	/ing, NJ 08628				
	F	hone 609-883-5391	Fax 609-530-1635				



The Comforts of Home

- Tastefully appointed apartments
- Gracious dining room
- Living room with large screen television and fireplace
- Wall-to-wall carpeting
- Three delicious, healthy kosher meals a day- special diets available
- Snacks and beverages available
- Telephone and cable television service available in each apartment
- Secure area for outdoor recreation and relaxation

Personalized Care

- Physical, speech and occupational therapy
- Referrals to specialists
- Medication supervision and administration by licensed nurses
- Health and personal supplies acquisition

Abrams Residence Assisted Living

Located in Ewing, New Jersey, Greenwood House is a non-sectarian, non-profit organization offering skilled nursing, assisted living, rehabilitation services, kosher meals on wheels, homecare and hospice services to the greater community.

The Abrams Residence is a 23-unit assisted living community located on our campus. It is designed to meet the needs of seniors who require assistance with activities of daily living, such as bathing, dressing, and medication assistance, but who do not need nursing home care.

Trained health care professionals are available to provide assistance to residents 24 hours a day, 7 days a week. Licensed nurses supervise administration of medications and manage all health and personal supplies for the resident.

The Abrams Residence is committed to meeting the physical, emotional and spiritual needs of the elderly in a secure, nurturing and caring assisted living environment.

Other Services

- Caring staff on-site 24 hours a day
- Barber and beauty salon
- Housekeeping
- Personal laundry and linen services
- Transportation to doctor's appointments
- Emergency call system in each apartment
- State-of-the-art safety and security equipment including:
 - Exit door alarms
 - Smoke detectors
 - Fire sprinklers
 - 24-hour emergency response system

Staff

- Licensed Nurses
- Certified Nursing Assistants
- Dietician
- Physicians
- Therapists
- Social Workers
- Activity Professionals

ACTIVITIES

- Social, spiritual physical and cultural programs
- Exercise classes
- Arts and crafts
- Holiday celebrations
- Sabbath and holiday services
- Outings to shopping malls, restaurants, movies
- Family, friends, and pets are always welcome to visit



The Abrams Residence is licensed by the New Jersey State Department of Health and is part of a comprehensive long-term care continuum. It is an option for seniors who need assistance and want to age in place.

Residents are provided with supervision, assistance and health care services in a secure and nurturing, home-like environment.

Offering one and two-bedroom apartments, residents may provide their own furnishings.

Apartment features include kitchenettes, bedroom and living room areas, bathroom and spacious closets.

For an application, to arrange for a tour or for further information please contact:

Abrams Residence 50 Walter Street Ewing, NJ 08628 609-883-5391 ext. 384

Living Room 11' 8" x 19' 5" Bedroom 1 12' x 10' 3" Closet Closet Bathroom Closet

Jreenv

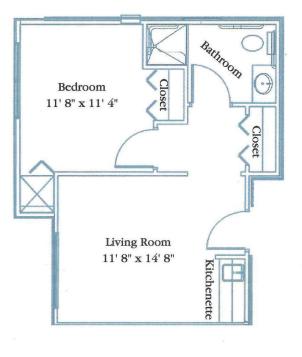
Two-Bedroom Model

SKILLED NURSING ASSISTED LIVING

HOMECARE SERVICES | REHABILITATION HOSPICE CARE | KOSHER MEALS ON WHEELS

USC

One-Bedroom Model 1



One-Bedroom Model 2

