



# Hospice Tree of Love

Orders can also be made at [www.leecountyhd.org](http://www.leecountyhd.org)



## A Gift to Someone You Love

The **Hospice Tree of Love** is sponsored by **Lee County Health Department**. The Hospice Tree of Love is an opportunity for you to honor or remember someone in a heartwarming way while helping Hospice continue caring for persons with a terminal illness. **The project is open to the public. Individuals may honor or remember anyone of their choice.**

### **A NEW ORNAMENT UNVEILED THIS YEAR**

This year the ornament, *Peace Lily*, is a beautiful, handcrafted porcelain oval with a peace lily designed by Mystic Images. The ornament has the year 2023 on the back of the attached card. When purchased the name of the person to be honored or remembered will be printed on a decorative tag and attached to the ornament.

Ornaments will be displayed on a tree at the Lee County Health Department lobby.



### **\*\*PLEASE NOTE CHANGES TO THIS YEAR'S ORDERING & CEREMONIES\*\***

This year ornaments will need to be purchased by **November 20<sup>th</sup>** if wanted read during the ceremony.

The Tree of Love Ceremony will take place on **Tuesday, December 5<sup>th</sup> at 2:00pm in the LCHD lobby** (#3 John Bennett Drive, Fort Madison). It will be posted to the LCHD Facebook page, and LCHD website ([www.leecountyhd.org](http://www.leecountyhd.org)). Ornaments will be on display through January 3<sup>rd</sup>. Anyone wanting them prior to the holidays may come to LCHD to pick-up or request they be mailed. After January 3<sup>rd</sup> LCHD will begin to mail the remaining ornaments directly to the person who ordered them. Please note that ornaments can be ordered until they are sold out.

Please tear off and mail in bottom portion. Keep the above as a reminder to attend the unveiling ceremony.

YES, I wish to recognize the following person:

(Select one)

- ☐ In Honor of: (for the living)  
☐ In memory of:

☐ I would like my ornament mailed to be before the holidays.

Donation of \$16.00 per ornament.

Number of ornaments ordered \_\_\_\_\_

Please add \$2.00/ornament for mailing \_\_\_\_\_

Amount enclosed \_\_\_\_\_

First Name \_\_\_\_\_ (Please Print) Last Name \_\_\_\_\_

Contributor Name \_\_\_\_\_

Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Phone number \_\_\_\_\_

Please return this form with your contribution to:

Lee County Health Department

PO Box 1426

Fort Madison IA 52627

All donations are tax deductible

**Thank you! Your gift to Hospice is appreciated!**