



## Angel Recognition Form

Please fill out this form and mail or email to:

**Hospice of Marion County Foundation**  
**ATTN: Stacey Perlmutter**  
**P.O. Box 4860**  
**Ocala, FL 34478-4860**

[sperlmutter@empathhealth.org](mailto:sperlmutter@empathhealth.org)

You have the opportunity to support Hospice of Marion County while paying tribute to a special hospice worker or volunteer who made a difference in your loved one's life and in the life of your family.

Your Angel will receive a special acknowledgement announcing that a contribution was made in their honor and also receive a special pinning recognition. Recipients wear their angel pins proudly.

I would like to honor an Angel with a donation of:

\$25     \$50     \$100     \$500     \$1,000     Other amount \$ \_\_\_\_\_

My gift is in honor of my Angel \_\_\_\_\_  
(Name of Empath Colleague or Volunteer)

Who cared for \_\_\_\_\_  
(Patient Name)

Please feel free to enclose a note to your Angel. We are happy to pass along your kind words.

### Payment

- Check:** Please write checks to **Hospice of Marion County Foundation**
- Credit card:** Please pay online at **HospiceOfMarion.com/Donate**, scan the QR Code at right; or, call **Stacey Perlmutter at 352-857-7894**.



ONLINE

### Contact Information

Your Name \_\_\_\_\_ Email Address \_\_\_\_\_

Address \_\_\_\_\_

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

- I plan on including Hospice of Marion County Foundation in my will or estate plan.
- I have included Hospice of Marion County Foundation in my will or estate plan.

## Your Gift Helps Brighten Lives in Our Community!



The Hospice of Marion County Foundation, Inc., is a registered 501(c)(3) non-profit corporation. A copy of the official registration and financial information may be obtained from the Division of Consumer Services by calling toll-free 1-800-435-7352 (or 1-800-352-9832 en Español) within the state or at [www.FloridaConsumerHelp.com](http://www.FloridaConsumerHelp.com). Registration does not imply endorsement, approval or recommendation by the State. One hundred percent (100%) of the donation is received by the Hospice of Marion County Foundation, Inc. Charitable Solicitation Registration #CH74429. HMCf-102124-0208

[sperlmutter@empathhealth.org](mailto:sperlmutter@empathhealth.org)  
Phone: 352-857-7894