

Annual Love Lights

Welcome to the PCHS annual program to commemorate and honor your friends and loved ones.

Peninsula Community Health Services (PCHS)

is a non-profit organization led by local citizens for the purpose of "strengthening our community by providing accessible, affordable healthcare." You probably know us better as Cottonwood Medical and Behavioral Health Clinics and Aspen Dental Center. Our team approach to healthcare combines physical and behavioral health care through caring providers and support staff while working together to prevent illness and restore wellness---putting body and mind together as they should be!

Love Lights is our annual giving program to benefit our patients who have health care needs beyond what we can address through our services and who do not have the resources to meet those needs, such as: medicines, transportation, and specialty care.

During this holiday season, we hope that you will join our board and staff in donating to our Patient Assistance Program in order to support our neighbors who are dealing with difficult health and financial challenges.

Peninsula Community
Health Services of Alaska

Ph 907.260.7300 Fax 907.260.7301

230 E. Marydale Ave., Ste #3
Soldotna, AK. 99669



We invite you to sponsor a light or lights to commemorate and honor a friend or loved one.

For a recommended \$5.00 each, you can sponsor a light that will shine throughout the winter months as a representation of your gift. It is easy to participate in our **Love Lights** program. Simply detach the donation form and complete the information requested. Choose the number of **Love Lights** you wish to sponsor and return the form with your tax deductible donation to the following address:

PCHS Love Lights
230 E. Marydale Ave., Ste #3
Soldotna, AK. 99669

Tree lighting ceremony to be held on December 9, 2010 at 5:30 p.m. at Cottonwood Medical and Behavioral Health building.



Cut along line and submit to PCHS



Yes, I would like to participate in the **Love Lights** program.
Enclosed is my tax deductible donation * in the amount of \$ _____ to sponsor
_____ number of **Love Lights** at a recommended donation of \$5.00 each.

Name: _____

Address: _____

Phone: _____

E-mail: _____

I would like to sponsor a light(s) in honor / memory of: _____

*PCHS is a 501 (c)(3) non-profit corp. Consult your tax professional.
This is an Equal Opportunity Program.

