



October 10, 2020

Dear Oneida Health Friend,

At this time of year it is tradition to give thanks for the blessings in our lives. We, the staff of Oneida Health, are grateful to all who come to us for the care they need and who help us continue our mission of serving our community every day.

Our Light a Light for Love program is a special way to honor or remember a loved one, to show appreciation to someone who has brightened your life, or acknowledge the work of someone very special. The Light a Light program allows you to say "Thank you" and "I remember." 2020 has been an especially challenging year for all of us. This program is a great way to honor and recognize not only our loved ones, but those essential workers including healthcare providers, police and firefighters, teachers, and those who work each day to keep us safe and help meet our needs.

All 2020 honorees will be listed in our Light a Light Book of Honor on display in the lobby at the ECF as well as on a rolling electronic display in the lobby of the hospital. Lights on the tree in front of the hospital will represent the loved ones being remembered and honored.

Your gift of \$10, \$25, \$50 or more will be used for the benefit of our patients and residents. With a gift of \$100 or more, your honorees name will be displayed on the LED signs which are located on Route 5. If you wish, a card will be sent to the family notifying them of your gift.

Unfortunately due to the COVID 19 pandemic, the Tribute to Love ceremony will be cancelled this year. It is our hope that we will once again conduct this very special service starting in 2021.

To contribute to Light a Light, please complete the attached form and return by Monday, November 30. This donation form is also available on the hospital website, [www.oneidahealth.org](http://www.oneidahealth.org). Your donation will directly benefit the patients and residents of Oneida Health and the Extended Care Facility.

Your support is so greatly appreciated.



**Please Print.** *A minimum donation of \$10 per honoree is encouraged.*

I would like to Light a Light for Love:

In Honor of \_\_\_\_\_

In Memory of \_\_\_\_\_

In Appreciation of \_\_\_\_\_

Please notify the honoree or his/her family of my gift at the address listed below.

Name \_\_\_\_\_

Address \_\_\_\_\_

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

Your name \_\_\_\_\_

Address \_\_\_\_\_

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

I wish to donate:

\$10 \$15 \$25 \$50 \$100 Other \$ \_\_\_\_\_

Please mail this with your payment to:

**Oneida Health Auxiliary**  
**321 Genesee St. Oneida NY 13421**

Make checks payable to: Oneida Health Auxiliary

All contributions are tax-deductible. *Thank you for your support.*