# Reply Form

❑ **Yes**, I am interested hosting a Third Party Event. I will commit to the following (please give as much detail as is necessary).

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❑ No, I am not interested in hosting a Third Party Event, but I would like to make a donation of $_____.

❑ I would like to schedule an event in the future

❑ I would like to discuss an idea for a Third Party Event

Contact Person_____

Company Name_____

Phone Number_____

Please return to: Angela Hospice, Attn: Barbara Paul, 14100 Newburgh Rd., Livonia, MI 48154