



Thank you for participating in our HUG program!  
*Your gift is sure to light up someone's life today.*

**GIVER INFORMATION:**

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I wish to remain anonymous.

Your name

Your address

City/State/ZIP

Your phone number

Gift amount  Check enclosed

**RECIPIENT INFORMATION:**

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Recipient name

Recipient address

City/State/ZIP

I do not have an intended recipient; I would like my HUG to help someone in need.

**MAIL THIS COMPLETED FORM TO:**

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ATTN: HUGS  
Consolidated Cooperative  
4993 State Route 521, Delaware, Ohio 43015  
*We accept HUG forms in-person at both of our offices.*

Fiber | Electric | Gas

consolidated.coop | Toll Free 800-421-5863

**Mount Gilead Office:** 5255 State Route 95 | Mount Gilead, Ohio 43338 | 419-947-3055

**Delaware Office:** 4993 State Route 521 | Delaware, Ohio 43015 | 740-363-2641