

LUTHERAN LEGACY FOUNDATION<sup>INC.</sup>

Deposit For:  
**The Central Illinois Lutheran Deaf Ministry Endowment Fund**  
**Account T03331**

Deposit Amount: \$ \_\_\_\_\_.

Date \_\_\_\_/\_\_\_\_/\_\_\_\_

*Check payable to:* Lutheran Legacy Foundation, Inc.

*Send to:* Lutheran Legacy Foundation, P.O. Box 31, Paris, IL 61944

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THANK YOU FOR YOUR DONATION