



Yes, I would like to make a difference in our community with this donation.

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**Memorial Gift Amount** **In Memory of (Name)**

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## Address

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City, State, Zip

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City, State, Zip

Email  Phone

Send memorial gift acknowledgment to:

**Address**

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City, State, Zip

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Email \_\_\_\_\_ Phone \_\_\_\_\_

Enclosed is a check payable to Luma NW

Please charge my credit card  
 Visa       Mastercard

Credit Card Number      Expiration Date      3-Digit Security Code

Expiration Date 3-Digit Security Code

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Signature

My employer will match my gift.  Please do not list my name or the memorial name.

Mail this form and payment to:

Luma NW

5107 Evergreen Way  
Everett, WA 98203

THANK YOU!

Luma NW is an all-volunteer, nonprofit 501©(3) organization. All donations are tax deductible within the limits of the law. Tax ID# 91-6069747