

**Yes, I want to help the Sainte Marie Foundation. Enclosed is my check for:**  
\_\_\_ \$25 \_\_\_ \$50 \_\_\_ \$100 \_\_\_ \$500 \_\_\_ \$1000 Other \$ \_\_\_\_\_

Name \_\_\_\_\_

Address \_\_\_\_\_

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

E-Mail Address \_\_\_\_\_

Phone (Home) \_\_\_\_\_ (Cell) \_\_\_\_\_

My donation is *in memory of*: (print) \_\_\_\_\_

Or *in honor of*: (print) \_\_\_\_\_

<i>Office use only</i> DR _____ _____ LTR _____ LST _____ XCI _____ EM _____ LBL _____
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(Names will be included in the Foundation's annual report.)

***Make check payable to Sainte Marie Foundation, PO Box 186, Ste. Marie, IL 62459.***

*The Sainte Marie Foundation is a 501(c)(3) organization. All gifts are tax deductible to the fullest extent of the law.*