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FRANCISCAN LIFE PROCESS CENTER

THANK YOU FOR YOUR CONTRIBUTION.

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Payment Options: *Check Enclosed* *Visa* *MasterCard* **Total Amt. Enclosed:*** _____

Credit Card # _____ **(3-digit # on back of card)** _____

*A **\$1.00 processing fee** is added to all charge orders. **Expiration Date:** _____

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Franciscan Life Process Center
11650 Downes Street
Lowell, MI 49331-9489