



I wish to purchase _____ luminary(s) at \$5.00 each. One name per luminary (\$5) please. **PLEASE PRINT ALL INFORMATION.** Thanks!

In Memory
 In Honor **Name:** _____
PLEASE PRINT - ONE NAME PER LINE

In Memory
 In Honor **Name:** _____
PLEASE PRINT - ONE NAME PER LINE

Purchased by: _____

Phone: _____ Amt. Enclosed: _____

Mail luminary forms and money to: PO Box 236, Mitchell, SD 57301 or drop off at either Cortrust Bank location in Mitchell.



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