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___\$75 ___\$100 ___\$250

\$_____ Other amount

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(LVISD Staff may set up payroll deductions)

Special Designation:

Name_____

Address_____

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If your Company has a matching funds program please enter required information below.

Make checks payable to

The LVISD Education Foundation

PO BOX 4085

Lago Vista, Texas 78645

Further information contact

512-267-8300