## Yes, I would like to give a monthly donation to Lewis-Manning Hospice



Address				
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			Postcode	
Telepho	one/ Mobile			
Email				
Hear abou	ut our latest news	, campaigns and events and how you	can support our w	rork
No, I don'	't want to hear fro	m you by email		
Your pers	sonal details are s	afe with us. We will never pass them	onto anyone else	2.
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Please f	ill in the standi	ing order form below:		
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