

**St. Thomas/Holy Spirit Lutheran Church  
Great Lakes Scrip Center Order Form**

Product	Qty	Each	Total
		\$	\$
<b>Total</b>		<del>                    </del>	\$

Name \_\_\_\_\_ Phone No. \_\_\_\_\_ Check No. \_\_\_\_\_ Date \_\_\_\_\_

Make check payable to STHS for the FULL AMOUNT (total).

THANKS! Your order resulted in a \_\_\_\_\_ profit for STHS!

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