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UDL Implementation and Research Network
P.O. Box 4364
Lawrence, KS 66046

Date: _____ (Please **PRINT** all information clearly)

Enclosed is my check in the amount of \$ _____ payable to the: UDL Implementation and Research Network.

My name: _____

Address: _____ Home phone: (____) _____

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(Receipt will be sent to the address above.)

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We thank you for your support.

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