Enclosed is my tax deductible gif					25 □Other_
Name		Phone Nun	Phone Number		
Address					
City State_		Zip Congregation/City			
I would like my gift to support: Greatest Need (Unrestric General Endowment Lutheran Education	Ĺ		α Ministry ce & Training Suppo ip Development		Worker Care
☐ I'm considering including the To explore additional ways to a My 2023 Christmas Gift	•				ate/ways-to-give.
Please make checks payable to N Return completed form and chec	_	,	•		below.
Credit Card Number	nerican Express	s, Diners Club)	Expiration Date		
Billing Address (if different from from	t)				Dotum to
Cardholder's Name (as it appears on the card)					Return to: Attn: Development Department Michigan District, LCMS 3773 Geddes Road
Signature Date					Ann Arbor, MI 48105

Signature _____ Date _____ By signing this form, the card holder is authorizing the Michigan District, LCMS to debit their card.