

Yes, President Davis, I would like to support the Michigan District, LCMS!

Enclosed is my tax deductible gift of : \$1,000 \$500 \$250 \$100 \$50 \$25 Other _____

Name _____ Phone Number _____

Address _____ Email _____

City _____ State _____ Zip _____ Congregation/City _____

I would like my gift to support: Greatest Need (Unrestricted)

Church Worker Care

Sower's Fund

Leadership Development

Lutheran Education

Mission & Ministry

Professional Church Worker Scholarships

General Endowment

Conference & Training Support

Other _____

I'm considering including the Michigan District in my estate, please contact me.

To explore additional ways to give to the Michigan District, visit michigandistrict.org/donate/ways-to-give.

My 2024 Summer Appeal Gift

Please make checks payable to Michigan District, LCMS or provide credit card information below.

Return completed form and check (if applicable) in the enclosed envelope.

Credit Card Number _____ Expiration Date _____
(MasterCard, Visa, Discover, American Express, Diners Club)

Billing Address (if different from front) _____

Cardholder's Name (as it appears on the card) _____

Signature _____ Date _____

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

Return to:
Attn: Development Department
Michigan District, LCMS
3773 Geddes Road
Ann Arbor, MI 48105