

*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:

<input type="checkbox"/> Lutheran Education	<input type="checkbox"/> Professional Church Worker Scholarships	<input type="checkbox"/> A2E Support
<input type="checkbox"/> Mission & Ministry	<input type="checkbox"/> District Youth Gathering Support	<input type="checkbox"/> Church Worker Care
<input type="checkbox"/> General Endowment	<input type="checkbox"/> Campus Ministry	<input type="checkbox"/> 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](http://michigandistrict.org/donate/ways-to-give).

To explore additional opportunities for giving contact Laura Thomas at [laura.thomas@michigandistrict.org](mailto:laura.thomas@michigandistrict.org)/734.213.4264.

**My 2025 Spring 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