



Faith Lutheran Church Donation Form

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Phone Number: _____

E-Mail: _____

Offering Envelope Number (if applicable): _____

Please direct my gift to the following area(s):

- General Fund
- Capital Appeal Building Fund
- Special Appeal (please list _____)
- Other (please list _____)

Donation Amount: _____

- Please send me a donation receipt.
- A donation receipt is not needed.

Please mail checks to: Faith Lutheran Church
255 Roosevelt Street
P.O. Box 369
Valders, WI 54245