

Faith Lutheran Church Donation Form

Name:				
Address:				
City:	S	tate:	Zip Code:	
Phone Number:				
E-Mail:				
Offering Envelope Nun	nber (if applicable):			
Please direct my gift to	the following area	(s):		
☐ General Fund				
☐ Property Fund				
☐ Special Appeal (please list)
\square Other (please lis	t)	
Donation Amount:				
Please send meA donation rece	a donation receipt. ipt is not needed.			
Please mail checks to:	Faith Lutheran Ch 255 Roosevelt Stre P.O. Box 369			

Valders, WI 54245