

GIFT & PLEDGE FORM

For such a time as this.

Thank you for joining Lutheran Social Service of Minnesota's (LSS) gala, the **Celebration for Changing Lives**, by making a gift or pledge to support our services.

Please complete this form and send it to LSS using the address below.

- I want to make a one-time gift of \$_____.**
I have enclosed my check, payable to "LSS", or entered my credit or debit card information below.
- I want to establish a recurring monthly gift of \$_____.**
I have enclosed a voided check or entered my credit or debit card information below.
- I pledge to give \$_____ at a future date.**
LSS may contact me to confirm and make arrangements to fulfill my pledge.

NAME(S) _____

ADDRESS _____

CITY, STATE _____ ZIP CODE _____

PHONE _____

EMAIL _____ (OPTIONAL)

If giving by credit or debit card, please provide the following additional information.*

NAME ON CARD _____

CARD NUMBER _____

EXPIRATION DATE _____ SECURITY CODE _____

* For security and convenience, LSS recommends making credit and debit card gifts online at lssmn.org/celebration.

GIFT NOTES

Please indicate on the line below whether you are making this gift in honor or memory of someone or if you wish to designate your gift for a particular program or location. (OPTIONAL)

I wish to remain anonymous.

Thank you for your gift.

Please sign, date, and mail your completed gift form to LSS. We are grateful for your generosity.

SIGNATURE _____ DATE _____

MAIL TO:
LSS Development
2485 Como Ave.
Saint Paul, MN 55108

QUESTIONS?
We're here to help. Please contact the LSS Development Team at 651.529.8899 or development@lssmn.org.