



This gift is from: *(please print legibly)*

NAME _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____
 E-MAIL _____

Enclosed is my gift of:

\$1,000 \$500 \$250 \$100 \$ _____

Please make checks payable to *Lutheran Social Services of NCA*

Charge my gift to: Visa MasterCard AMEX

Card No. _____ Exp. Date _____ CCV/Sec. Code _____

SIGNATURE _____

Enclosed is my pledge of:

I would like to pledge \$ _____ annually, to be made in equal payments

Semi-annually Quarterly Monthly Semi-monthly

SIGNATURE _____

Please designate my gift/pledge to:

Adoption and Foster Care \$ _____ Refugee and Immigrant Services \$ _____
 Camp for Children with HIV/AIDS \$ _____ Where my Gift is Needed Most \$ _____
 Disaster Preparedness & Response \$ _____

This gift is given in memory of: in honor of: _____

Please send notification of my gift, without specifying the amount, to:

NAME _____
 ADDRESS _____
 CITY _____ STATE _____ ZIP _____

My employer has a matching gifts program.

COMPANY NAME _____ PHONE _____

I am a member of Thrivent Financial for Lutherans. Please send me a Giving Plus® form.

I would like more information about: Including LSS/NCA in my will Volunteering

Mail gifts and completed form to:

Office of Development and Stewardship
 4406 Georgia Avenue, NW
 Washington, DC 20011

On behalf of your neighbors who benefit from your gift, Thank You!

Contributions are deductible to the extent allowed by law