

St. John's Evangelical Lutheran Church

Special Gifts and Memorials Request Form

I/We wish to make a special gift to Saint John's Lutheran Church:

Donor's Name: _____

Donor's Address: _____

Donor's Phone Number: _____

_____ Anonymus (*I/We wish no published recognition*)

Designated Item or Items: _____

Amount: _____

_____ Undesignated Gift: *The gift is undesignated and may be used as needed*

Amount: \$ _____

The Gift is given:

___ In Celebration: ___ In Honor Of: ___ In Memory Of: ___ To The Glory of God:

Check enclosed: (*payable to Saint John's Lutheran Church*)

Total Amount: \$ _____ Date: _____

PLEASE RETURN THIS FORM WITH YOUR DONATION TO:

Saint John's Evangelical Lutheran Church
3512 Clinton Street
West Seneca, New York, 14224
Attention: Special Gifts & Memorials Committee
Or place it in the offering plate during worship.
(Please do not send cash through the mail)