



Your questions and feedback are very important to us. Please feel free to contact us at (614) 641-2984. Thank you for your support.

Donate by mail

Please print this form and complete the information below to ensure proper preparation of your tax receipt (please print clearly). To donate to a specific program, please write the name of the program on the memo line of your check.

If you would like to donate by phone via credit card, please call (614) 641-2984.

Your Contact Information

Today's date _____ Donor name _____

Organization name (if applicable) _____

Address _____

City _____ State _____ Zip _____

Country _____

Phone (optional) _____ Email (optional) _____

Yes, you may contact me via phone or email with future information about LSS Network of Hope programs.

Payment Information

I WOULD LIKE TO DONATE THE FOLLOWING AMOUNT \$ _____ One-time gift Monthly

LUTHERAN SOCIAL SERVICES PROGRAM

Please mark an "x" on your desired program. This will enable us to apply your donation where you intend.

- LSS Network of Hope LSS Faith Mission
 LSS Food Pantries LSS CHOICES LSS Faith Mission of Fairfield County

DONATING BY CHECK

Please write your check payable to Lutheran Social Services and mail to the address below.

Please mail this completed form to:

Lutheran Social Services
Attention: Philanthropy Dept.
1105 Schrock Road, Suite 100
Columbus, Ohio 43229

DONATING BY CREDIT CARD

Credit card number _____

Expiration date _____

Name on the card _____

- VISA American Express
 Master Card Discover

ADMIN CODE: WEBSITE