



Your questions and feedback are very important to us. Please feel free to contact us at (614) 429-5500. 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) 429-5500.

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## 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.

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## 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