

Donation Form for Luther Home of Mercy

Thank you for including us in your giving plans. Please complete this form so we can retain a record of your intentions. We are honored to simply celebrate you for your intentions.

vame:			
Address:			
	State: Zip:		
hone:	Email:		
This gift will be:			
Use where it is n	eeded most.		
Restricted for th	e purpose of: (check all tha	t apply)	
☐ Ginny's Kitchen & Central Storage		☐ Garden of Compassion	
☐ Resident/Client services		☐ Transportation	
he type of gift I have	designated to your work is	s:	
Please notify:			
	Address		
	City		
	·		
Please notify:	Name		
	Address		
	City	State	Zıp
I would like to	transfer life insurance, stoo	ck or an asset to make n	ny gift. Please call me.
Enclosed is my	check: payable to Luther H	Iome of Mercy	
		·	
	credit card to process this g	•	
(If you would p	orefer, call Megan O'Brien a	it 419-836-7741 to mak	e a donation over the phone.)
lame as it appears on	the card		
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xpiration Date:		Security Code:	
ignature:			Date:
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If you have any questions related to making a gift, or would like to learn more about transferring stock, funds from and IRA or other asset donations please call Jeanette Hrovatich, Director of Planned Giving at 419-972-4373.