



GATHERING GOD'S GIFTS FOR GOOD

Amount Pledged \$ _____ Amount Enclosed \$ _____

Name _____ Thrivent Member? Yes _____ No _____

Address _____

City _____ State _____ Zip Code _____

Email _____ Phone _____

Church Affiliation _____ Town _____

MAIL TO:

LUTHERAN CHARITIES, 6540 MAIN STREET, WILLIAMSVILLE, NY 14221

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