

ELCA Foundation Credit Card Mail-In Form

To charge your contribution to your credit card, please complete the required information, print the form and mail to the address listed below.

Your name and address as it appears on your credit card bill.

Name: _____

Address: _____

City: _____ State: _____ Zip Code: _____

Daytime Telephone: _____

Please use my gift for the following ministry: _____

May only be used for gift of \$50 or more.

Amount of Gift \$ _____

Please charge my gift to: Visa [] MasterCard [] Discover [] AmericanExpress []

Credit Card Number: _____ Expiration Date: _____

Comments/Memorials: _____

Please mail donation to:

ELCA Foundation
8765 W. Higgins Road
Chicago, IL 60631

“Leave a Legacy for Ministry”

ELCA Foundation - Gifts the Nurture the Whole Church