

Memorial and Endowment Request

Date:

Name of Organization:

Contact Name:

Address:

City:

State:

Zip:

Phone:

Amount Requested:

\$

Please describe in a short paragraph the purpose of your request and how this donation will benefit your organization.

Please mail to First Lutheran Church Mem & Endow Committee, PO Box 346, Hayward, WI

54843 Or email to office@flchaywardwi.org



*Plant your seeds now and trust in the Lord
that these seeds will bear fruit even when you are gone*