

# RECORD OF SPECIAL GIFT OR MEMORIAL

Trinity Lutheran Church  
203 N. Harth Avenue - Madison, SD 57042  
(605) 256-2771

Name(s) of Donor(s): \_\_\_\_\_

Contact Person (if other than donor): \_\_\_\_\_

Address: \_\_\_\_\_

Phone No.(s): \_\_\_\_\_

E-mail/Other contact information: \_\_\_\_\_

*If memorial:* This gift is given in memory of: \_\_\_\_\_

**Please use this gift of \$ \_\_\_\_\_ as specified below:**

- Unrestricted – Use Where Needed Most \$ \_\_\_\_\_
- Trinity *Faith in Action* Endowment Fund \$ \_\_\_\_\_
- Trinity *Cornerstone Endowed* Fund \$ \_\_\_\_\_
- Trinity *Cornerstone* (Building) Fund \$ \_\_\_\_\_
- Trinity *Deacons* Fund \$ \_\_\_\_\_
- Trinity *Parish Education* Fund \$ \_\_\_\_\_
- Restricted *“Named Endowment”* Fund \$ \_\_\_\_\_  
(available for gifts of \$10,000 or more)
- Other \_\_\_\_\_ \$ \_\_\_\_\_

Please indicate any additional comments regarding this gift below or on attached document(s):

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Received by \_\_\_\_\_ Date: \_\_\_\_\_

For Trinity Lutheran Church

*(retain copy; original to donor)*