

Gift Application Form

Please complete the information requested below to recommend an individual or group for consideration as a recipient of a monetary gift from one of the established funds of the Grace Lutheran Endowment Fund.

Date: _____

I wish to nominate:

Name of individual or group _____

Address _____

City, State, Zip _____

to be considered to receive a gift from the (select fund):

- | | |
|---------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Grace Fund: non-designated distributions | <input type="checkbox"/> Higher Education / Seminary Fund: benefiting students of Grace seeking education at a college or seminary of the ELCA |
| <input type="checkbox"/> Music Fund: benefiting music programs at Grace | <input type="checkbox"/> Community Social Ministry Fund: benefiting programs in Apple Valley / Dakota County |
| <input type="checkbox"/> Youth Fund: benefiting Grace youth and their programs | <input type="checkbox"/> World Mission Fund: for the work of ELCA World Missions |

This individual or group should be considered for the following reasons:

Last date nominations are accepted: September 30 each year

Place completed form in the Endowment Fund Committee mailbox in the church office,
or return to a member of the Church Council or Endowment Fund Committee.

If awarded, the gift would be utilized in the following ways in support of the purpose of the fund selected above.

Total amount requested: \$ _____

Submitted by: _____

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