



# Carroll Lutheran Village Annual Fund Campaign Appeal FY 2026 DONATION FORM

Please support the mission of Carroll Lutheran Village during the 75-day Annual Fund Campaign by making your charitable donation or pledge today for the current fiscal year! All contributions help fund CLV's charitable mission and initiatives to benefit CLV residents and team members ensuring the Village remains a vibrant community. Thank you.

**Total amount of my donation enclosed with this form: \$ \_\_\_\_\_**

**I wish to designate my gift, as follows:**

*(Please select all that apply and write the dollar amount or percentage of your donation for each fund designation).*

**Percentage/Dollar Amount below:**

- |  |       |
|--|-------|
| <input type="checkbox"/> Benevolent Care Fund              | _____ |
| <input type="checkbox"/> Ministry of Caring Endowment Fund | _____ |
| <input type="checkbox"/> Walters Education Fund            | _____ |
| <input type="checkbox"/> General Fund (unrestricted)       | _____ |

\_\_\_\_\_ In Honor/Tribute/Memory of: \_\_\_\_\_

**NOTE: Please attach a list of names for all honor/tribute/memorials and let us know if you want to remain anonymous or would like us to notify the honoree/family of your gift.**

**\_\_\_\_\_ In lieu of making my gift today, I prefer to PLEDGE my gift to be fulfilled by the end of the fiscal year on June 30, 2026. For pledges, please complete the REVERSE SIDE of this form.**

**My preferred method of payment for my donation:**

- \_\_\_\_\_ Check made payable to Carroll Lutheran Village.
- \_\_\_\_\_ Online at [www.clvillage.com/giving](http://www.clvillage.com/giving) via credit or debit card.
- \_\_\_\_\_ ACH Debit from my checking/savings account. Please contact me for bank info.
- \_\_\_\_\_ Required Minimum Distribution/Qualified Charitable Distribution from IRA.
- \_\_\_\_\_ Gift of Stock. Please contact me with instructions for this stock/securities transfer.

**Print Name \_\_\_\_\_ Date \_\_\_\_\_**

**Signature \_\_\_\_\_**



# Carroll Lutheran Village Annual Fund Campaign Appeal FY 2026 PLEDGE FORM

Total amount of my pledge with this form: \$ \_\_\_\_\_

I wish to pledge my gift, as follows:

*(Please select all that apply and write the dollar amount or percentage of your pledge for each fund designation).* **Percentage/Dollar Amount below:**

- Benevolent Care Fund \_\_\_\_\_
- Ministry of Caring Endowment Fund \_\_\_\_\_
- Walters Education Fund \_\_\_\_\_
- General Fund (unrestricted) \_\_\_\_\_

\_\_\_\_\_ In Honor/Tribute/Memory of: \_\_\_\_\_

Please attach a list of names for all honor/tribute/memorials. Thank you.

I will fulfill my pledge, as follows: \_\_\_\_\_ Monthly \_\_\_\_\_ Quarterly \_\_\_\_\_ Annually

My preferred method of payment for my pledge:

\_\_\_\_\_ Check made payable to Carroll Lutheran Village.

\_\_\_\_\_ Online donation at [www.clvillage.org/giving](http://www.clvillage.org/giving) via credit or debit card.

\_\_\_\_\_ ACH Debit from my checking/savings account. Please contact me for bank info.

\_\_\_\_\_ Required Minimum Distribution/Qualified Charitable Distribution from IRA.

\_\_\_\_\_ Gift of Stock. Please contact me with instructions for this stock/securities transfer.

Print Name \_\_\_\_\_ Date \_\_\_\_\_

Signature \_\_\_\_\_

Please return this completed form to the Office of Philanthropy no later than October 15, 2025. Donations made via check should be payable to "Carroll Lutheran Village." Donations via debit/credit card are accepted via our website at [www.clvillage.org/giving](http://www.clvillage.org/giving). Thank you!

Questions or comments? Please contact Paige Mills-Haag, Vice President of Philanthropy at 443-536-5929 or [pmillshaag@lsmmd.org](mailto:pmillshaag@lsmmd.org).