

DONATION FORM

Mail-In Form with Tribute Options

Please print this form and complete the information below to ensure we can properly process and acknowledge your gift.

For over 140 years, Kentucky Woman's Missionary Union (WMU) has focused its vision, actions, and resources to equip Kentucky Baptists to embrace the Great Commission. When you give, you help strengthen missions involvement for generations to come. Thank you for investing in missions and ministry efforts through Kentucky WMU.

Kentucky WMU

13420 Eastpoint Centre Dr.
Louisville, KY 40223
502-489-3534 (Office)
www.kywmu.org

DONOR INFORMATION

Donor Name (First Name and Last Name) : _____

Address : _____

City : _____ **State :** _____ **Zip Code :** _____

E-Mail : _____

Phone Number : _____ Home Mobile

By providing your email address and/or phone number, you will be placed on our donor's life and will receive news and other ways to get involved with the ministries of Kentucky WMU. You may unsubscribe at any time.

DONATION OPTIONS

One Time Gift Amount : _____

I'm enclosing my check made payable to the Kentucky WMU

I'm enclosing my cash donation

I WANT TO SUPPORT

Please designate this gift to one of the following:

Kentucky WMU Heritage Fund

Ministries to Missionaries Offering

Kentucky Changers General Fund

Kentucky WMU General Fund

Anna Mary Byrdwell Mission Trip Fund

Other _____

Tax Information: The Kentucky Woman's Missionary Union (WMU) is registered as a 501(c)(3) non-profit organization. Contributions to the ministries of Kentucky WMU are tax-deductible to the extent permitted by law.

Your questions and feedback are very important to us. Please feel free to contact us at kywmu.org or call 502-489-3534. Thank you!

MAKE YOUR GIFT A TRIBUTE

Choose your Tribute Type. We'll send your honoree or their family a personalized card letting them know of your thoughtful contribution.

In Memory of In Honor of

Special Occasion: _____

From: _____

Honoree Full Name: _____

Your relation to honoree: _____

Acknowledgement to be sent by:

Donor Kentucky WMU

Please send the tribute to:

Full Name: _____

Address: _____

City, St: _____

Zip Code: _____

Please mail this completed form to: Kentucky WMU | 13420 Eastpoint Centre Dr. | Louisville, KY 40223