

Lutheran South Academy
Donation to Capital Campaign
In Lieu of Reimbursement Form

Name _____ Date _____

Mailing Address _____

City, State, Zip _____

Phone _____

Value of Gift: _____

Event / Designation _____

Description of Items Purchased _____

Items Purchased for (check one):

_____ High School PTL - 200980-01-U

_____ Middle School PTL - 201270-01-U

_____ Lower School PTL - 201460-01-U

_____ Athletic Booster Club - 200765-01-U

_____ Other (please specify) _____

Check One: _____ **Apply to my pledge** _____ **One time gift**

Please attach copies of receipts.

Thank you for purchasing items for LSA and donating to our Growing LSA Campaign.