**First United Methodist**

**Memorials and Honorariums Donation Form**

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| Donors Name(s): |  |
|  | (if married and both are giving please list both names) |
| Donors Address: |  |
|  | (only need if address is different from check or if E-giving) |
| Contact person & phone #: |  |
|  | (will be contacted if we have any questions concerning your gift) |
| Okay to publish in newsletter: |  | Yes |  | No |

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| **In Memory or Honor of:** |  |
| Amount given: |  |
| Fund given to: |  |
|  | (ex: Respite, ICN, We Care, Children’s Ministries, Youth Ministries, Altar or Flower Guild, etc.) |
| **Send Acknowledgement to:** |
| Name: |  |
| Address: |  |
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