



The LSS Founders Family

Realizing the value of planned gifts to the LSS Foundation to be used for future support of Lutheran Social Services of South Dakota, I/we have made one or more of the following provisions:

- Included LSS of SD Foundation in my will.
- Established a life-income plan with LSS of SD Foundation.
- Named LSS of SD Foundation as a beneficiary in a life insurance policy on my life.
- Made other provisions for the benefit of LSS of SD Foundation (please describe below.)

The estimated value of this gift is _____

I/we wish the proceeds to be used for the work of Lutheran Social Services of South Dakota or

(indicate specific LSS program)

Name: _____

Address: _____

Phone: _____

Email: _____

- I give my approval to have my name included in The Founders Family membership listed in publications of Lutheran Social Services of South Dakota.
- I request that my name not be included in The Founders Family membership list.

Donor Signature

Date

Donor Signature

Date