Radical Women Kingston Lake Women Making a Radical Change DONATION FORM

	DONA					
First Name	e:					
Or Business Name:	· · · · ·					
Mailing Address:						
City:	St	ate:	Z	'ip Code:		
Phone: ( )	Em	ail Address: _				
Affiliation: Member of	of KLMBA Or Frier	nd of KLMBA	Your Churc	:h :		
Do you want YOUR NA	ME to be public?	<b>Circle one:</b> YE	S, public is fi	ne or NO, I wa	ant no n	name used
Donation Amo	unt: \$	•				
	CASH, Money gi CHECK, Mail Check to: CASH APP- \$Ki GIVELIFY APP- DEBIT/CREDIT (	Mailed or h PO Box 1318, C ngstonLakeM Kingston Lake	and given to Conway, SC 2952 BA, Notes: <b>I</b> MBA Notes	28 Or PO Box 7 Name of Wom Name of Wor	16, Loris, Dan, You man, Yo	SC 29569 ur Name our Name
DISTRICT DONATIC District 1 & 2 S District 3 Sis. A District 4 Sis. C District 5 Evan	Sis. Carolyn Jackson ( Angie Randall and De Geraldine Gore, Sis. B gelist Stephanie Long	Graham and S acon Jannie Is illie Faye Johr g and Sis. Milo	is. Thelma Ga som hson, Chairm dred Welch	alloway an & Rev. Hatt	tie Grał	
SELECT ONE :	Wall of Honor (\$19	9 or less) O	R	_ Circle of Influ	uence (	\$250+)
	NLY FOR DONAT	ION of \$1	00 or less		HON	IOR
	Sister Reverend Jame:	Missionary	Deacon Last Name:	Deaconess	Lady	Pastor
COMPLETE ONLY	FOR DONATIO	N of \$200	or MORE =	= CIRCLE O	FINFL	UENCE
Circle Title: Mother IN HONOR OF : First MESSAGE/CHURCH: ( FROM:	Name: [ <b>35 Characters or le</b> s	;s	Last Name: _			
How to submit your p 1) Upload a picture and se	<b>icture electronically</b> end it to 843-405-0453 as phone number 843-405-0	a text. If necessa 1453.	<b>CTURES WILI</b> ary, take a pictur	L NOT BE ACC	<b>EPTED</b> th a cell p	ohone and

**Date Letter Mailed**