

To Place an Order, Please Complete the Form Below and Return to:
The LAMB Institute, 215 Hickory Street, Charleston, SC 29407

Gift	Price	Qty	Gift	Price	Qty
Truckload of Drinking Water	\$50		Birthday Gift	\$10	
Water for One Month	\$636		Birthday Cake	\$15	
Blanket for One Bed	\$5		Lawnmower/Tractor	\$1500	
Bed Linens for One Bed	\$10		Antibiotics for 1 Day	\$5	
Basic Needs Basket	\$35		Doctor's Visit	\$25	
Teacher's Salary for 1 Day	\$20		Hospital Stay for 1 Night	\$200	
Teacher's Salary for 1 Week	\$85		Missionary Training Books	\$15	
Teacher's Salary for 1 Month	\$350		Travel Expenses	\$50	
School Supplies for 1 Child / 1 Day	\$5		Oil Change for the Bus	\$40	
School Books for 1 Child	\$30		One Tire for the Bus	\$100	
Feed One Child for 1 Day	\$2		Gas for 1 Day	\$22	
Feed One Child for 1 Month	\$55		Residential Staff Salary for 1 Day	\$15	
One Chicken	\$8		Residential Staff Salary for 1 Week	\$65	
One Chicken	\$8		Residential Staff Salary for 1 Month	\$270	
Farm Tools	\$15		Monthly Giving	\$ _____	
One Goat	\$40				
			Total Amount Enclosed		

GIVER	Giver Name _____				
	Address _____	City _____	State _____	Zip _____	
	Phone _____		email address _____		
RECIPIENT	Recipient Name _____				
	Address _____	City _____	State _____	Zip _____	
RECIPIENT	Recipient Name _____				
	Address _____	City _____	State _____	Zip _____	
RECIPIENT	Recipient Name _____				
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If additional names are needed, please attach an additional sheet

The LAMB Institute is a registered not for profit 501(c)3 organization.

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Monthly Giving

If you are interested in supporting LAMB on a monthly basis, there are several ways of doing so:

- Online via Paypal. Find out how by visiting the "Give" page of our website at www.lambinstitute.org
- By mailing a check monthly to:
LAMB, 215 Hickory Street, Charleston, SC 29407
- By automatic monthly credit card donation. If you prefer giving monthly by credit card, please complete the form below and return to us at the address listed.

LAMB Automatic Monthly Credit Card Giving Form

Please return to 215 Hickory Street, Charleston, SC 29407

First Name _____ Last Name _____
Address _____
City _____
State _____ Zip _____
Phone (area code) (_____) _____ - _____
Email address: _____

Which credit card (circle): Visa Master Card Discovery
Card #: _____
Expiration date: _____
Please charge \$ _____ to my card one time only.
Please charge \$ _____ to my card monthly.*

Start automatic payments on _____ (date: month and year)*
____ Continue ongoing payments until I notify you otherwise
____ Stop automatic payments on _____ (date)

This recurring payment is
____ For general operating funds
____ For LAMB child sponsorship
____ For other designated) _____

Signature authorizing us to use credit card:

(Required)

*If you would like to stop the automatic payments, please email gottshalk@musc.edu or call Tammy Barnes Gottshalk at 843-270-4014.

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