

AUTHORIZATION FORM

The **Simply Giving** Program
endorsed by



FOR OFFICE USE ONLY	ENVELOPE/DONOR #	
<p>Lutheran Church of the Resurrection</p> <p>Type of Authorization: <input type="checkbox"/> New Authorization <input type="checkbox"/> Change donation amount <input type="checkbox"/> Discontinue electronic donation <input type="checkbox"/> Change banking information <input type="checkbox"/> Change donation date</p>		
Last Name		First Name
Address		
City	State	Zip
Email Address		
<p>Please debit my donation from my (check one):</p> <p><input type="checkbox"/> Checking Account (attach a voided check below)</p> <p><input type="checkbox"/> Savings Account (contact your financial institution for Routing #)</p>		<p>Routing Number: _____ <i>Valid Routing # must start with 0, 1, 2, or 3</i></p> <p>Account Number: _____</p> <p style="font-size: small; text-align: center;"> </p>
<p>FIRST DONATION DATE:</p> <p>____ / ____ / ____</p>	<p>FREQUENCY OF DONATION:</p> <p><input type="checkbox"/> Weekly on Monday</p> <p><input type="checkbox"/> Weekly on Friday</p> <p><input type="checkbox"/> Monthly on the 1st</p> <p><input type="checkbox"/> Monthly on the 15th</p> <p><input type="checkbox"/> Semi-Monthly (transferred on 1st and 15th of each month)</p>	<p>FUNDS AND AMOUNTS:</p> <p><input type="checkbox"/> General/Operating \$ _____</p>
<p>AGREEMENT</p> <p>I authorize the above church to process debit entries to my account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.</p> <p>Authorized Signature: _____ Date: _____</p>		

New Participants, please attach voided check here.

Not required for change of amounts or cancellation