
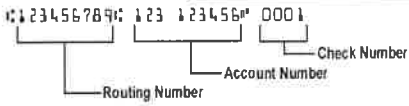


# AUTHORIZATION FORM

The **Simply Giving** Program  
 endorsed by  
 Thrivent Financial Bank

<b>FOR OFFICE USE ONLY</b>	<b>DONOR #:</b> _____	<b>DATE:</b> _____														
Name of the Church: _____ Effective date of authorization: ____/____/____ Type of Authorization Form: <table style="display: inline-table; vertical-align: top; margin-left: 20px;"> <tr> <td><input type="checkbox"/> New Authorization</td> <td><input type="checkbox"/> Change banking information</td> </tr> <tr> <td><input type="checkbox"/> Change donation amount</td> <td><input type="checkbox"/> Discontinue electronic donation</td> </tr> <tr> <td><input type="checkbox"/> Change donation date</td> <td></td> </tr> </table>			<input type="checkbox"/> New Authorization	<input type="checkbox"/> Change banking information	<input type="checkbox"/> Change donation amount	<input type="checkbox"/> Discontinue electronic donation	<input type="checkbox"/> Change donation date									
<input type="checkbox"/> New Authorization	<input type="checkbox"/> Change banking information															
<input type="checkbox"/> Change donation amount	<input type="checkbox"/> Discontinue electronic donation															
<input type="checkbox"/> Change donation date																
Last Name		First Name														
Address																
City	State	Zip														
Email Address																
<b>DONATION:</b>																
<b>Date of first donation:</b> ____/____/____  <b>Date of last donation (optional):</b> ____/____/____	<b>Frequency of donation:</b> (please check one) <table style="margin-left: 20px;"> <tr><td><input type="checkbox"/> Monthly on the _____</td></tr> <tr><td><input type="checkbox"/> Weekly on the _____</td></tr> <tr><td><input type="checkbox"/> Bi-Weekly (every other week)</td></tr> <tr><td><input type="checkbox"/> One Time</td></tr> </table>	<input type="checkbox"/> Monthly on the _____	<input type="checkbox"/> Weekly on the _____	<input type="checkbox"/> Bi-Weekly (every other week)	<input type="checkbox"/> One Time	<b>Funds and donation amounts:</b> <table style="margin-left: 20px;"> <tr><td><input type="checkbox"/> General Operating</td><td>\$ _____</td></tr> <tr><td><input type="checkbox"/> Building</td><td>\$ _____</td></tr> <tr><td><input type="checkbox"/> Evangelism / Outreach</td><td>\$ _____</td></tr> <tr><td><input type="checkbox"/> _____</td><td>\$ _____</td></tr> <tr><td><input type="checkbox"/> _____</td><td>\$ _____</td></tr> </table>	<input type="checkbox"/> General Operating	\$ _____	<input type="checkbox"/> Building	\$ _____	<input type="checkbox"/> Evangelism / Outreach	\$ _____	<input type="checkbox"/> _____	\$ _____	<input type="checkbox"/> _____	\$ _____
<input type="checkbox"/> Monthly on the _____																
<input type="checkbox"/> Weekly on the _____																
<input type="checkbox"/> Bi-Weekly (every other week)																
<input type="checkbox"/> One Time																
<input type="checkbox"/> General Operating	\$ _____															
<input type="checkbox"/> Building	\$ _____															
<input type="checkbox"/> Evangelism / Outreach	\$ _____															
<input type="checkbox"/> _____	\$ _____															
<input type="checkbox"/> _____	\$ _____															
Please debit my donation from my (check one): <table style="margin-left: 20px;"> <tr><td><input type="checkbox"/> Checking Account (attach a voided check below)</td></tr> <tr><td><input type="checkbox"/> Savings Account (contact your financial institution for Routing #)</td></tr> </table>		<input type="checkbox"/> Checking Account (attach a voided check below)	<input type="checkbox"/> Savings Account (contact your financial institution for Routing #)	Routing Number: _____ <i>Valid Routing # must start with 0, 1, 2, or 3</i>  Account Number: _____ 												
<input type="checkbox"/> Checking Account (attach a voided check below)																
<input type="checkbox"/> Savings Account (contact your financial institution for Routing #)																
<b>AGREEMENT</b>																
I authorize the above church and Vanco Services, LLC 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.																
Authorized Signature: _____		Date: _____														

*Please staple voided check here.*