

# AUTHORIZATION FORM

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

FOR OFFICE USE ONLY	ENVELOPE/DONOR #	DATE
<p><b>St. John's Evangelical Lutheran Church</b></p> <p>Effective date of authorization: _____/_____/_____</p> <p>Type of Authorization Form:    <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</p>		
Last Name		First Name
Address		
City		State      Zip
Email Address		
Please debit my donation from my (check one): <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: _____ <small>                     1234567890 123 456789 0001                      └─── Routing Number      └─── Account Number      └─── Check Number                 </small>
FIRST DONATION DATE: _____/_____/_____	FREQUENCY OF DONATION: <input type="checkbox"/> Weekly on Monday <input type="checkbox"/> Monthly on the 1 <sup>st</sup> <input type="checkbox"/> Monthly on the 15 <sup>th</sup> <input type="checkbox"/> Semi-Monthly (transferred on 1 <sup>st</sup> and 15 <sup>th</sup> of each month)	FUNDS AND AMOUNTS: <input type="checkbox"/> General/Operating      \$ _____ <input type="checkbox"/> Building                      \$ _____ <input type="checkbox"/> Evangelism/Outreach      \$ _____ <input type="checkbox"/> _____                      \$ _____ <input type="checkbox"/> _____                      \$ _____  <p style="text-align: right;">Total \$ _____</p>
<p><b>AGREEMENT</b></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>		

*Please attach voided check here.*