VANCO SIMPLY GIVING AUTHORIZATION FORM

ROYAL REDEEMER LUTHERAN CHURCH

						-						
Lost Nama												
Last Name First Name												
Address												
City						Zip						
Ema	Email Address											
, , ,		☐ Semi-Monthly – 1 st and 15 th ☐ Monthly on the 1 st	FUNDS: General/Operatin Building Misc Missions	g Total	AMOUNTS: \$ \$ \$ \$							
C H E C K I N G /	Please debit my donation from m Savings Account (contact y Checking Account (attach a	Routing Number: Valid Routing # must start with 0, 1, 2, or 3 Account Number: 1, 1, 2, 3, 4, 5, 6, 7, 8, 9, 1, 1, 2, 3, 4, 5, 6, 7, 8, 9, 1, 1, 2, 3, 4, 5, 6, 7, 8, 9, 1, 1, 2, 3, 4, 5, 6, 7, 8, 9, 1, 1, 2, 3, 4, 5, 6, 7, 8, 9, 1, 1, 2, 3, 4, 5, 6, 7, 8, 9, 1, 1, 2, 3, 4, 5, 6, 7, 8, 9, 1, 2, 3, 4, 3, 4, 3, 4, 3, 4, 3, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4, 4,										
S A V _ :	I authorize the above organization 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.											
N G S	Authorized Signature:	Date:										
If using a checking account, please attach a voided check at the bottom of this page.												
FOR	OFFICE USE ONLY	ENVELOPE/DONOR #	ENVELOPE/DONOR #		DATE							

FOR OFFICE USE ONLY	ENVELOPE/DONOR #	ENVELOPE/DONOR #		DATE						
Effective date of authorization://										
		New authorization Change banking information	☐ Change donation amount nation ☐ Discontinue electronic dona				Change donation date			