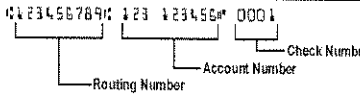


# AUTHORIZATION FORM

The Simply Giving Program  
 endorsed by  


FOR OFFICE USE ONLY	ENVELOPE/DONOR #	DATE
Name of the church: _____ Effective date of authorization: ____/____/____ 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		
Last Name		First Name
Address		
City		State
Zip		
Email Address		
Date of first donation: ____/____/____  Date of last donation: ____/____/____	<b>FREQUENCY OF DONATION:</b> (check only one) <input type="checkbox"/> Weekly on _____ <input type="checkbox"/> Monthly on _____ <input type="checkbox"/> Semi-monthly (transferred on 1 <sup>st</sup> and 15 <sup>th</sup> of each month)	<b>FUNDS AND AMOUNTS:</b> <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>
<b>CHECKING / SAVINGS</b>	Please debit my donation from my (check one): <input type="checkbox"/> Savings Account (contact your financial institution for Routing #) <input type="checkbox"/> Checking Account (attach a voided check below)	Routing Number: _____ <i>Valid Routing # must start with 0, 1, 2, or 3</i>  Account Number: _____ 
	I authorize the above church and Vanco Services 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: _____	
<b>CREDIT CARD</b>	Please charge my donation to my (check one): <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard <input type="checkbox"/> American Express <input type="checkbox"/> Discover Card	
	Credit Card Number:	Expiration Date:
	Name on Card:	
	Billing Address (if different from above):	
	I authorize the above church and Vanco Services to charge my credit card in accordance with the information above. Signature (as it appears on the credit card): _____ Date: _____	

Please attach voided check over credit card section above if using checking account.