

# Simply Giving Authorization Form

The Simply Giving® Program

endorsed by



**THRIVENT**  
FEDERAL CREDIT UNION®

Name of the organization: **OUR SAVIOUR'S LUTHERAN CHURCH**

<b>FOR OFFICE USE ONLY</b>	<b>ENVELOPE #</b>	<b>DATE</b>
<b>Effective date of authorization:</b> ____/____/____ <b>Type of authorization:</b> <input type="checkbox"/> New authorization <input type="checkbox"/> Change donation amount <input type="checkbox"/> Change donation date <input type="checkbox"/> Change banking information <input type="checkbox"/> Discontinue electronic donation		
Last Name		First Name
Address		
City		State                      Zip
Email Address		
<b>Date of first donation:</b> ____/____/____	<b>Frequency of donation:</b> (please check one) <input type="checkbox"/> Monthly on the 1 <sup>st</sup> <input type="checkbox"/> Monthly on the 15 <sup>th</sup> <input type="checkbox"/> Bi-Weekly (every other week) <input type="checkbox"/> Weekly <input type="checkbox"/> One Time	<b>Ordinary Giving:</b> \$ _____ (General, Children's Ministry, Confirmation, Preschool, etc.)  <b>Extraordinary Giving:</b> \$ _____ (From Mortgage to Mission)
<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) <p style="text-align: center;"><b>PLEASE ATTACH A VOIDED CHECK</b></p>	Routing Number: _____ <b>Valid Routing # must start with 0, 1, 2, or 3</b>  Account Number: _____ 
	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.  Authorized Signature: _____ Date: _____	
<b>CREDIT / DEBIT CARD</b>	Card Brand (check one): <input type="checkbox"/> Visa <input type="checkbox"/> MasterCard	
	Card Number:	Expiration Date:
	Name on Card:	
	Billing Address (if different from above):	
	I authorize the above organization to process transactions in accordance with the information above.  Signature (as it appears on the card): _____ Date: _____	

The *Simply Giving Program* allows you to give contributions' through pre-authorized withdrawals from your bank account or credit/debit card. It is a reliable, secure way to move your stewardship plan into motion. Because your donation is given consistently, you won't need to play "catch-up" at year-end or worry about forgotten checkbooks or missed Sunday offerings. OSLC also benefits from steady, more predictable revenues throughout the year, more efficient bookkeeping and greater confidence in meeting financial commitments.

*Privacy/Confidentiality:* The Authorization Form is seen by the OSLC Bookkeeper, and information is reported to Vanco Service for processing. Participant information will not be shared with any other organizations.