

# **SIMPLY GIVING Authorization Form**

*Please Print Clearly*

CHURCH NAME

YOUR NAME

ADDRESS

CITY, STATE, ZIP

EMAIL ADDRESS

I would like to make the following contribution(s):

<input type="checkbox"/>	General Operating Fund	\$ _____
<input type="checkbox"/>	Other	\$ _____
<input type="checkbox"/>	Other	\$ _____
TOTAL		\$ _____

Date of first contribution: \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

Frequency of contribution (check one):

<input type="checkbox"/>	Weekly, Mondays	<input type="checkbox"/>	Semi-Monthly, 1st & 15th
<input type="checkbox"/>	Monthly, 1st	<input type="checkbox"/>	Monthly, 15th

## **CHECKING / SAVINGS**

Complete this section with the information from your account.

Please debit my (check one):

<input type="checkbox"/>	Checking Account - attach VOIDED check
<input type="checkbox"/>	Savings Account - attach VOIDED deposit slip

BANK ROUTING #

ACCOUNT #

***I authorize the above organization and Vanco Services to process debit entries to the above account. I understand that this authority will remain in effect until I provide reasonable notification to terminate the authorization.***

SIGNATURE

DATE