



FIRST LUTHERAN CHURCH

Sharing Christ's Love

The *Simply Giving* Program — Authorization Form

Name of the organization: First Lutheran Church · 114 E Main Street · Geneseo, Illinois 61254

FOR OFFICE USE ONLY		ENVELOPE #		DATE	
Effective date of authorization: ____/____/____					
Type of authorization: <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			Phone Number		
DATE OF FIRST DONATION: ____/____/____		FREQUENCY OF DONATION: <input type="checkbox"/> Weekly – Mondays <input type="checkbox"/> Semi-Monthly – 1 st and 15 th <input type="checkbox"/> Monthly on the 1 st <input type="checkbox"/> Monthly on the 15 th		FUNDS: <input type="checkbox"/> General Fund <input type="checkbox"/> Capital Campaign <input type="checkbox"/> Building Fund <input type="checkbox"/> Music & Arts <input type="checkbox"/> World Hunger <input type="checkbox"/> Other	
				AMOUNTS: \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ \$ _____ Total \$ _____	
CHECKING / SAVINGS	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: _____ Valid Routing # must start with 0, 1, 2, or 3 Account Number: _____ <small>⑆ 1 2 3 4 5 6 7 8 9 ⑆ 1 2 3 1 2 3 4 5 6 ⑆ 0 0 0 ⑆</small> <div style="display: flex; justify-content: space-around; width: 100%;"> <div style="border-top: 1px solid black; width: 20%;"></div> <div style="border-top: 1px solid black; width: 20%;"></div> <div style="border-top: 1px solid black; width: 20%;"></div> <div style="border-top: 1px solid black; width: 20%;"></div> <div style="border-top: 1px solid black; width: 20%;"></div> </div> <div style="display: flex; justify-content: space-around; width: 100%; margin-top: 5px;"> Routing Number Account Number Check Number </div>	
	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: _____					

Complete this form and return it to the church office if you wish to begin using *The Simply Giving* Program.

- **When you submit your form, you will be removed from the offering envelope mailing list, although you will maintain your envelope number, which still can be used with the pew envelopes for special gifts. Questions, talk with Financial Secretary Lynn Lindell by calling the church office at 944-3196 or emailing llindell@firstgeneseo.org.**