## **AUTHORIZATION FORM**

endorsed by

Thrivent Financial Bank

FOR OFFICE USE ONLY	ENVELOPE/DONOR #				DATE	
Name of Church Prince of Peace ELCA Saratoga, Ca						
Effective date of authorization: _						
Type of Authorization Form:	<ul><li>New Authorization</li><li>Change donation amount</li><li>Change donation date</li></ul>	00				
Last Name			First Name			
Address						
City			State		Zip	
Email Address		-				
Please debit my donation from my (check one):  Checking Account (attach a voided check below)  Savings Account (contact your financial institution for Routing #)			Routing Number:  Valid Routing # must start with 0, 1, 2, or 3  Account Number:  Check Humber  Account Number  Account Number			
FIRST DONATION DATE:	FREQUENCY OF DONATION:  Weekly on  Monthly on  Semi-Monthly (transferred on 1st and 15th of each	eekly on onthly on		FUNDS AND AMOUNTS:  General/Operating \$ Synod \$ Capital Drive \$ other (pls. specify) \$  Total \$		
AGREEMENT  I authorize the above church and Vanco Services, LLC 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:						

## New Enrollment or account change

Please attach voided check here.