



**St. James** LUTHERAN  
Burnsville, Minnesota

## Authorization Form

**Name:** \_\_\_\_\_  
Please print first and last name

**Envelope #:** \_\_\_\_\_  I will not need weekly envelopes anymore.

**Checking account information:** found on the bottom of checks

**Routing #:** \_\_\_\_\_ **Account #:** \_\_\_\_\_

095555455 : 123456789 : 2356  
↑ Routing #   ↑ Account #   ↑ Check #

**Frequency:**

- Weekly (on Monday)
- Monthly on 1<sup>st</sup>
- Monthly on 15<sup>th</sup>
- Semi -monthly (on 1<sup>st</sup> & 15<sup>th</sup>)

**Amount:**

\$ \_\_\_\_\_

**First Donation Date:** \_\_\_ / \_\_\_ / \_\_\_

**Type:**  New authorization  Change in donation amount

**Agreement:**

I authorize St. James Lutheran 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.

**Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Office use only:**

Date entered into Vanco: \_\_\_\_\_

St. James Lutheran Church • 952-890-4534 • Doreen@stjameslc.com

SIMPLY GIVING - VANCO SERVICES