



*Help us grow*

Print out this form  
to fill it in.

Mail or deliver to:  
Palm Lutheran Church  
11 W. Cherry Street  
Palmyra, PA 17078

## AUTHORIZATION FORM

Church Name: \_\_\_\_\_

Your Name: \_\_\_\_\_

Address: \_\_\_\_\_

City, State, Zip: \_\_\_\_\_

Email address: \_\_\_\_\_

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

- General Operating Fund     \$ \_\_\_\_\_
- Special Designated             \$ \_\_\_\_\_
- Capital Fund                         \$ \_\_\_\_\_
- Mortgage Reduction             \$ \_\_\_\_\_
- Other                                     \$ \_\_\_\_\_
- TOTAL**                                 \$ \_\_\_\_\_

Date of first contribution:

\_\_\_\_\_/\_\_\_\_\_/\_\_\_\_\_

Frequency of contribution (check one):

- Weekly - Mondays
- Semi-monthly - 1st and 15th
- Monthly on the 1st
- Monthly on the 15th

### CHECKING/SAVINGS ACCOUNT

Please debit my (check one):

- Checking account—*attach voided check*                       Savings Account—*attach voided deposit slip*

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.

Authorization signature: \_\_\_\_\_ Date: \_\_\_\_\_