



The **Simply Giving**® Program
endorsed by
 **Thrivent Financial Bank**®

Lutheran Church of the Resurrection
Marietta, Georgia

The Simply Giving® Program
endorsed by



Enjoy the convenience of electronic giving

Lutheran Church of the Resurrection offers electronic giving, which helps you to make donations on a scheduled, automatic basis. If you are writing checks and preparing envelopes every week, you will especially appreciate electronic giving. It is convenient for you and provides much-needed donation consistency for LCR.

How to get started

To set up electronic donations to LCR, please complete the authorization form on the right and return it to the church office, along with a voided check or deposit slip. Your donations can be debited automatically from either a checking or savings account. All personal information remains strictly confidential and is seen only by the Financial Secretary or Simply Giving administrator.

If you have any questions about the Simply Giving program or other forms of electronic payment, please contact the LCR Bookkeeper, Tom Crawford at Tom@LCRmarietta.org or call 770-953-3193, ext 24.

AUTHORIZATION FORM

Church name: LUTHERAN CHURCH OF THE RESURRECTION - MARIETTA, GA	
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"/> Building 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 – 1 st and 15 th	
<input type="checkbox"/> Monthly on the 1 st	
<input type="checkbox"/> Monthly on the 15 th	

CHECKING / SAVINGS	<i>Complete this section if using your checking or savings account</i>
Please debit my (check one):	
<input type="checkbox"/> Checking account—attach voided check <input type="checkbox"/> Savings account—attach voided deposit slip	
Routing #:	Account #:
<i>Valid routing # must start with 0,1,2 or 3</i>	
I authorize the above organization 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.	
Authorized signature: _____ Date: / /	

Please attach VOIDED check or deposit slip for verification

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