



Office of the Treasurer
Evangelical Lutheran Church in America
 God's work. Our hands.

AUTHORIZATION for AUTOMATIC MONTHLY CREDIT CARD DONATIONS

I hereby authorize the Evangelical Lutheran Church in America (ELCA) to initiate debit electronic transactions for donations from my credit card account into the ELCA account at Harris Bank. Recurring donations are processed on the first (1st) or the fifteenth (15th) business day of each month, as noted below. I will notify the ELCA Office of the Treasurer in writing if I wish to change or stop my monthly contributions.

Please charge my gift to: VISA MASTERCARD DISCOVER AMER. EXPRESS

Credit card number: _____ Exp. Date: _____

Security Code: _____ Signature: _____

Your name and address exactly as it appears on your credit card bill:

Name: _____

Address: _____ City: _____

State: _____ ZIP: _____ Daytime Phone #: _____

Additional Contact Information (not required):

Spouse Name: _____

E-mail address(es): _____

Congregation Name (plus city, state): _____

Total Monthly Gift Amount: \$ _____

Please send me **(check one)** a **receipt after every gift** or an **annual statement** of my giving.
 Please process my gift on the **1st of the month** or the **15th of the month**.

Please use my gift for: **Where the need is greatest (Vision for Mission fund)**
 World Hunger Domestic Disaster Response
 Missionary Sponsorship Stand With Africa Other: _____
 Fund for Leaders in Mission International Disaster Response

If you have selected more than one fund, tell us how to split your monthly gift (\$5.00 minimum per fund, please):

I have read, understand, and agree with the information contained on this form.

Signature: _____ Date: ____/____/____

Please return this form by fax or by mail to:
John Temmerman - Remittance Office
ELCA Office of the Treasurer | 8765 West Higgins Road | Chicago, IL 60631 | FAX: 773-380-2115