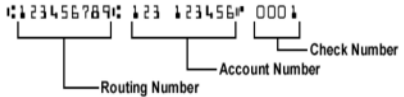


AUTHORIZATION FORM **FLLC TENACIOUS 200**

FOR OFFICE USE ONLY	DONOR #: _____	DATE: _____
Name of Organization <u>Fortune Lake Lutheran Camp, 138 Fortune Lake Camp Rd, Crystal Falls, MI 49920</u>		
Effective date of authorization: _____/_____/_____		
Type of Authorization Form: <input type="checkbox"/> New Authorization <input type="checkbox"/> Change donation amount <input type="checkbox"/> Change donation date <input type="checkbox"/> Change banking information <input type="checkbox"/> Discontinue electronic donation		
Last Name _____		First Name _____
Address _____		
City _____	State _____	Zip _____
Email Address: _____		Phone: _____
DATE of FIRST DONATION: _____/_____/_____	FREQUENCY OF DONATION: <input type="checkbox"/> Monthly on the 1 st <input type="checkbox"/> Monthly on the 15 th <input type="checkbox"/> Semi-Monthly (transferred on 1 st and 15 th of each month)	FUNDS AND AMOUNTS: <input type="checkbox"/> Tenacious General Fund Support \$ _____ <input type="checkbox"/> Total \$ _____
CHECKING / SAVINGS	Please debit my donation from my (check one): <input type="checkbox"/> Savings Account (contact your financial institution for Routing #) <input type="checkbox"/> Checking Account (attach a voided check below)	Routing Number: _____ Valid Routing # must start with 0, 1, 2, or 3 Account Number: _____ 
	I authorize the above organization 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.	
Authorized Signature: _____		Date: _____

Please attach voided check if using checking account.
