

AUTHORIZATION AGREEMENT FOR PRE-AUTHORIZED TRANSFERS

(Please attach a voided check)

I (We) hereby authorize **Lutherans For Life** to initiate electronic debit and/or credit entries, via the Automated Clearing House (ACH) system, indicated below. The purpose of these transactions is for an unrestricted contribution to **Lutherans For Life**.

Transfers will take place on, or about, the 15th of each month. The “prenote” process takes at least a week, so the initial contribution may not take place for over a month.

Donation (debit) amount: \$_____

Transfer Type:

- Checking
- Savings

Please initiate the transfer FROM (or see the attached voided check):

Bank Name: _____ Routing Number: _____

Bank City: _____ State: _____ Zip: _____

Bank Phone Number: _____

Account Name _____ Account Number: _____

This authorization is to remain in full force and effect until **Lutherans For Life** has received written notification from me (or either of us) of its termination in such time and in such manner as to afford **Lutherans For Life** a reasonable opportunity to act on it.

Name: _____ Phone Number: _____

Address: _____

City: _____ State: _____ Zip: _____

Authorized Signature _____

Dated _____

Send to: **Lutherans For Life**
1101 5th Street
Nevada, IA 50201-1816