**ST. JAKOBI LUTHERAN CHURCH**

**DIRECT GIVING FORM**

**Through Associated Bank in Shawano, WI**

*“Honor the Lord with your wealth, with the first fruits of all your crops.” Proverbs 3:9*

**Direct Giving Agreement Form**

**AUTHORIZATION AGREEMENT**

I hereby authorize St. Jakobi Lutheran Church to initiate automatic withdrawals from my account at the financial institution named below. I also authorize St. Jakobi Lutheran Church to make deposits to this account in the event that a debit entry is made in error.

Further, I agree not to hold St. Jakobi Lutheran Church responsible for any delay or loss of funds due to incorrect or incomplete information supplied by me or by my financial institution or due to an error on the part of my financial institution to withdrawal funds from my account.

This agreement will remain in effect until St. Jakobi Lutheran Church receives a written notice of cancellation from me, or until I submit a new Direct Payment form to St. Jakobi Lutheran Church.

**ACCOUNT INFORMATION**

**Name of my Financial Institution:**

**Routing Number:**

*(attach a deposit ticket or cancelled check)*

**Account Number:**

 *This a checking account*  *or savings account*

**DESIGNATION OF FUNDS**

*FUNDS WILL BE WITHDRAWN FROM YOUR ACCOUNT ON THE* ***5TH*** *DAY OF EACH MONTH.*

*Exception if it falls on a weekend or a holiday. Withdrawal will then be made on the next business day.*

* I would like to contribute to the GENERAL FUND in the amount of $
* I would like to contribute to the BUILDING FUND in the amount of $
* I would like to contribute to WRLHS (Luth. High) FUND in the amount of $

**\*\*For any other contributions I will use my envelopes\*\***

**NOTIFICATIONS:** I will notify the Financial Secretary at St. Jakobi Lutheran Church if I plan to

terminate or make any other changes to this plan.

Signature: Date:

Signature: Date:

Envelope # Phone number:

**St. Jakobi Lutheran Church**

**Direct Giving (DG) Agreement Form Instructions**

* Complete the Direct Giving (DG) form.
* Include your Financial Institute account information:
	+ Routing number – include a deposit ticket or voided check with the form.
	+ Account number – indicate if you want withdrawals from your checking or savings account
	+ Funds will be directly deposited into the St. Jakobi Lutheran Church checking account at Associated Bank in Shawano, WI
	+ This form will be kept confidentially in the Church Office.
* Funds from your designated account will be withdrawn on the 5th day of each month. If the 5th falls on a weekend or holiday, the funds will be withdrawn on the next business day.
* Designation of funds. Direct Giving (DG) is for the General Fund, the Building Fund or WRLHS (Wolf River Lutheran High School) only. For any other contributions, please use your offering envelopes.
* Notify the Financial Secretary at St. Jakobi Lutheran Church if you plan to terminate this agreement or make any other changes. For changes, please complete another Direct Giving form and place in an envelope. This should be placed in the Financial Secretary box located near the church office.
* Provide signatures of all person(s) that are listed on your account and date when signed.
* Include your envelope number.
* Include a contact phone number.

 When the financial secretary receives the statement of deposits from the bank, a direct payment batch will be prepared and the funds will be applied to your envelope number with the fund(s) you have chosen. You will continue to receive a year end statement from St. Jakobi Lutheran Church.

* Any questions, please contact Marlene Weckwerth, SJ Financial Secretary at 920-400-0013.