

# Joyful Response<sup>®</sup>

*Our congregation offers you a way to **respond joyfully** in meeting your stewardship commitments.*

Use *Joyful Response* to:

- Give consistently.
- Help you prepare and fulfill your stewardship plans.
- Share your generosity efficiently and predictably.

Complete this form and return it to the church office.

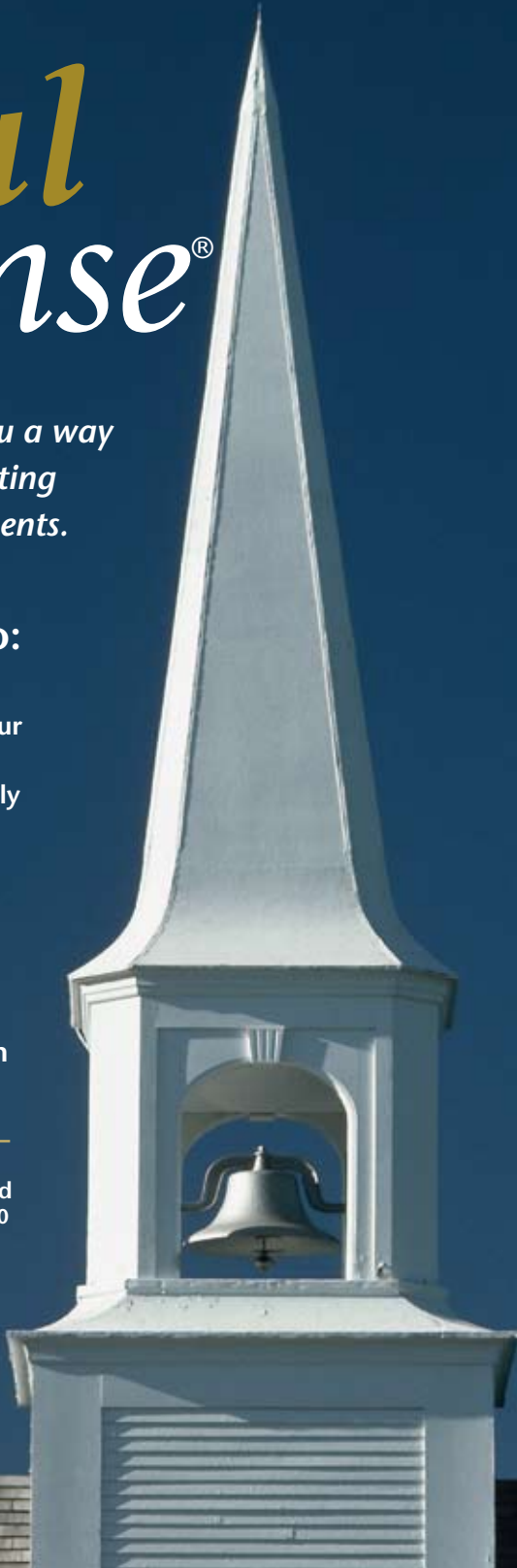
---

*Joyful Response*<sup>®</sup> service provided by:



Lutheran Church Extension Fund  
10733 Sunset Office Drive, Suite 300  
St. Louis, MO 63127-1020  
1-800-843-5233 • [www.lcef.org](http://www.lcef.org)

LCEF is a nonprofit religious organization; therefore, LCEF investments are not FDIC-insured bank deposit accounts. This is not an offer to sell investments, nor a solicitation to buy. The offer is made solely by LCEF's Offering Circular. Investors should carefully read the Offering Circular, which more fully describes associated risks.



### Enrollment/Change Form

Complete this form and return it to the church office to begin or change your current stewardship offering. Your offering will be made automatically from your bank account or your LCEF StewardAccount®.

#### Check the appropriate box:

- New enrollment     
  Offering change     
  Account information change

Please Print in Black Ink

Member Last Name	First Name	MI	Daytime Telephone No.
Mailing Address	City, State, ZIP		E-mail Address
Congregation Name		Congregation Telephone Number	
Congregation Mailing Address		City, State, ZIP	

### My Offering

Fund Designations:	Amount:
1. General Fund _____	\$ _____
2. Building _____	\$ _____
3. _____	\$ _____
4. _____	\$ _____
5. _____	\$ _____
6. _____	\$ _____
<b>TOTAL</b>	<b>\$ _____</b>

### Debiting Account

#### Debit from:

- Checking  
 Savings  
 LCEF StewardAccount

Account Number \_\_\_\_\_

Routing Number (First nine numbers in bottom left-hand corner of check) \_\_\_\_\_

#### Transfer Date (check one):

- Weekly (Monday)  
 Semi-monthly (1st and 15th)  
 Monthly on the 1st  
 Monthly on the 15th  
 Other \_\_\_\_\_  
 (As approved by church office)

Start date: \_\_\_\_/\_\_\_\_/\_\_\_\_

End date (if any): \_\_\_\_/\_\_\_\_/\_\_\_\_

### Authorization

I authorize the above-named organization and Vanco Services, LLC to process debit entries from my account. This authority will remain in effect until I give reasonable notification to terminate this authorization or until the last specified payment date.

Authorized Signature for Account \_\_\_\_\_

Date \_\_\_\_\_

#### TO BE COMPLETED BY CHURCH OFFICE

Member ID# \_\_\_\_\_      Initials \_\_\_\_\_  
 Vanco Client ID# \_\_\_\_\_      Date \_\_\_\_\_

Attach void check or savings deposit slip here.