

# Joyful Response<sup>®</sup>

*Our congregation offers  
a free electronic offering  
program for you.*

## Use *Joyful Response* to:

- transfer your stewardship offering directly from your bank or Lutheran Church Extension Fund StewardAccount<sup>®</sup> safely and conveniently.
- help you plan and fulfill your stewardship commitments in a timely manner.
- eliminate the time and cost of writing checks.

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*Joyful Response* service provided by:



**Lutheran Church Extension Fund**  
PO Box 229009 • St. Louis, MO 63122-9009  
1-800-843-5233 • [www.lcef.org](http://www.lcef.org)

LCEF is a nonprofit religious organization; therefore, LCEF investments are not SIPC- or FDIC-insured bank deposit accounts. This is not an offer to sell investments or a solicitation to buy. The offer is made only in states where authorized and solely by LCEF's Offering Circular.



### 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 lefthand 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.**