

Joyful Response[®]

*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 service provided by:



Lutheran Church Extension Fund

> where investments build ministry

10733 Sunset Office Drive
Suite 300
St. Louis, MO 63127-1020
800-843-5233
lcef.org



LCEF StewardAccount access features provided through UMB Bank n.a. LCEF is a nonprofit religious organization; therefore, LCEF investments are not FDIC-insured bank deposit accounts. This is not an offer to sell LCEF investments, nor a solicitation to buy. LCEF will offer and sell its securities only in states where authorized. The offer is made solely by LCEF's Offering Circular. Investors should carefully read the Offering Circular, which more fully describes associated risks.

Joyful Response[®] Electronic Offering Program

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
Mailing Address	City, State, ZIP	Email Address	
Immanuel Lutheran Church		410-435-6861	
Congregation Name	Congregation Telephone Number		
5701 Loch Raven Boulevard	Baltimore, MD	21239-2936	
Congregation Mailing Address	City, State, ZIP		

My Offering

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

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.