



Lutheran Church
Extension Fund

PO Box 229009
St. Louis, MO 63122-9009
1-800-843-5233

Authorization for Automatic Interest Payments

- New authorization
- Change to existing authorization

Please complete and sign this form and attach a void check. Either mail to the above address or fax this form (along with a copy of a void check) to: (314) 996-1129.

Do not mail and fax this form; please choose one form of communication with LCEF.

Account Holder(s): _____

Contact person (if different from above): _____

Telephone: (Home) _____ (Work) _____

Note: "I" refers to all account holders, whether one or more.

I authorize LCEF to automatically deposit the interest payments described below to the checking or savings account also described below. I understand that the amount of interest may vary due to a change in the rate of interest, account balance or number of days in the payment period. In the event of an error, I further authorize LCEF to initiate a correcting entry to the same account. LCEF will not be liable beyond correcting the error in the account.

This authorization is valid until revoked by the account holder either verbally or in writing. I understand that LCEF must receive this verbal or written notification 15 business days before the next scheduled transaction date.

I authorize LCEF to withdraw interest from the following accounts:

LCEF Account Number(s): _____

Note: Interest will be paid at the end of each calendar quarter (StewardAccounts® pay monthly). LCEF accounts with a balance of \$5,000 or more may receive monthly interest payments.

- Send the interest monthly

Name of Financial Institution: _____

Branch: _____

Routing Number (nine digits): _____

- Checking Account Number _____ **OR**

- Savings Account Number _____

Address: _____

City, State, ZIP: _____

Phone Number: _____

Name(s) as shown on checking/savings account: _____

A void check or deposit slip (for savings account) must be returned with this authorization.

Signature Required (All owners of the LCEF account must sign.)

Name _____

Signed **X** _____ Date _____

Title (for organizations only): _____

Name _____

Signed **X** _____ Date _____

Title (for organizations only): _____

Name _____

Signed **X** _____ Date _____

Title (for organizations only): _____