



EFT – ELECTRONIC FUNDS TRANSFER
AUTHORIZATION AGREEMENT

Please complete this form and mail or fax to:

WELS Church Extension Fund, Inc.

2929 N Mayfair Road

Milwaukee WI 53222-4398

Fax: 414.256.3864

I hereby authorize WELS Church Extension Fund, Inc. to initiate credit entries to the checking or savings account designated below and the depository institution named below for the purpose of payments of interest on investment Certificates. If necessary, a debit entry may be initiated for correction only.

Please type or print clearly

Depository Name: _____

City: _____ State: _____ Zip: _____

ABA/TRN#: _____ Account #: _____

Print Name: _____ Joint Name: _____