

The Mississippi United Methodist Foundation, Inc.
P. O. Box 2415, Ridgeland, MS 39158-2415
Phone: 601-948-8845 Fax: 601-360-0843

Direct Deposit Authorization Agreement

List all Account Names and Account Numbers you have with The Foundation for Direct Deposit of Distributions (withdrawals, income distributions, etc), from:

Foundation Account Name

Account Number

Foundation Account Name

Account Number

Foundation Account Name

Account Number

Foundation Account Name

Account Number

Foundation Account Name

Account Number

I authorize The Mississippi United Methodist Foundation, Inc. and the financial institution listed below to electronically deposit distributions to my:

Checking Savings Account

Business Personal

Name of Bank to Receive your Deposit

Branch (if any)

City

State

Zip Code

Bank Account Number to receive Deposit

Bank Transit/ABA Number

If monies to which I am not entitled are deposited to my account, I authorize The Mississippi United Methodist Foundation, Inc. to direct the financial institution to return said funds. This authority will remain in effect until I have filed a new authorization, or until revoked by me in writing.

(Please Print) Name

Signature

Title

Date

Please staple to this form a voided check to verify bank account information for deposits into a Checking Account or a deposit slip for deposits into a Savings Account.