



MORAVIAN THEOLOGICAL SEMINARY

ELECTRONIC FUND TRANSFER AUTHORIZATION

Company Name: Moravian Theological Seminary

Contact Name: Lisa A. Brand

Phone: 610-861-1338 or 800-429-9437

I (We) hereby authorize Moravian Theological Seminary to initiate by electronic means debit entries to my (our) () checking or () savings account at the Depository institution named below and to initiate, if necessary, credit entries and adjustments for debit entries in error. I (We) authorize the Depository to accept and to debit and/or credit the amount of such entries to my (our) account. If from checking account, please enclose a voided check.

Name(s): _____
(as it appears on account)

Account Number: _____

Transit/ABA Number: _____

Depository Name: _____

City, State, Zip: _____

Monthly amount debited: _____

This authority is to remain in full force and effect until Moravian Theological Seminary has received written notification from me (us) of its termination in such time and in such manner as to afford Moravian Theological Seminary and the Depository a reasonable opportunity to act on it and in no event shall a termination notice be effective with respect to entries processed by Moravian Theological Seminary or the Depository prior to its receipt.

Signature: _____

Date: _____

Signature: _____

Date: _____

If this is a joint account, both signatures are required.

Please return this form to: Moravian Theological Seminary, Attn: Institutional Advancement,
1200 Main Street, Bethlehem, PA 18018