



UNITED CHURCH OF CHRIST CORNERSTONE FUND INC.

AUTHORIZATION AGREEMENT FOR DIRECT DEPOSIT UCC CORNERSTONE FUND ACCOUNT # _____

I authorize UCC Cornerstone Fund Inc., and the Bank named below to initiate debit entries and, if necessary, credit entries or adjustments for any debit in error to my account listed below (select one):

Checking Account - Attach a voided check.

Savings Account - Attach a deposit slip.

Amount to be withdrawn \$ _____ on the _____ of each month starting _____. (If transaction date falls on a weekend or a holiday, the amount will be taken the next business day).

BANK/DEPOSITORY INFORMATION:

Bank Name: _____

City: _____ State: _____ Zip: _____

ABA/ Bank Routing Number: _____

Bank Account Number: _____

I clearly understand that the Bank/Depository I have named above will receive debit entries. This authorization is to remain in full force and effect until UCC Cornerstone Fund Inc., has received written notification from me of its termination in reasonable time for the UCC Cornerstone Fund Inc., and the financial institution to act upon it.

AUTHORIZATION:

Name (Print): _____

Last

First

Middle

Daytime Phone Number: (____) _____ E-mail _____

Signature: _____ Date: _____

INSTRUCTIONS: Complete the Automatic Debit Authorization Form above and make a copy of the completed authorization for your record. PLEASE MAIL THIS FORM TO: UCC CORNERSTONE FUND, INC., ACCOUNTING DEPARTMENT, 700 PROSPECT AVENUE, CLEVELAND, OH 44115 – Phone 888.822.3863