

DIRECT WITHDRAWAL AUTHORIZATION AGREEMENT

CHURCH
NAME:

ADDRESS:

AMOUNT OF
TRANSFER:

START DATE:
FREQUENCY:

I hereby authorize MISSIONARY CHURCH INVESTMENT FOUNDATION, Inc., through FIRST MERCHANTS BANK, to initiate credit entries and to initiate, if necessary, entries and adjustments for any errors or returns to my (our) account indicated below.

ACCOUNT INFORMATION:

BANK NAME:	CITY	STATE	ZIP
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CHECKING/SAVINGS	ROUTING NUMBER	ACCOUNT NUMBER
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This authority is to remain in full force and effect until Missionary Church Investment Foundation Bank receives written notification from me of its termination in such time and manner as to afford Missionary Church Investment Foundation/First Merchants Bank a reasonable opportunity to act on it.

AUTHORIZED SIGNATURE

DATE