

Dear Employer:

You can stop writing checks for employee retirement contributions. GuideStone Financial Resources® can take care of that for you. Now you'll be able to pay us through convenient, secure electronic funds transfer, **a service that adds benefits and eliminates checks.**

Here are four ways this service can help you and your employees:

1. **You save time.** No one has to manually process or cut a check. GuideStone® does the work.
2. **You save money.** The task is eliminated, so you don't have to pay someone to do it. The check is eliminated, so you'll buy fewer checks.
3. **You assure the accuracy of your payments.** This service and your timely reporting of participant changes assure that what you pay reflects your billing to the penny.
4. **You reduce the risk of lost checks.** Sometimes checks get delayed or don't reach their destination at all. That's an embarrassing hassle and can cost you extra bank charges for stop-payment fees and the clerical costs of processing another check.

Important information:

- Bank account debit around the 15th of the month. If the 15th falls on a holiday or during the weekend, the debit will be processed on the next GuideStone business day. To assure accuracy of your billing and debit, changes to participant accounts must be received by GuideStone two to three days before the specified debit date.
- There is a five-day period following the initial prenotification of a financial institution before the first debit transmission may be processed.
- Contributions to participants' accounts generally will post within 24 hours after GuideStone initiates the Automated Clearing House (ACH) request.

It's a simple process to take advantage of this service.

Act now. Fill out and return this *Automated Clearing House Payment Authorization* (reverse side) so your employees' retirement plan contributions can be conveniently and securely paid — without a check.

If you have questions, call our toll-free number, **1-888-98-GUIDE** (1-888-984-8433).

Automated Clearing House Payment Authorization

Retirement Operations

Employers should use this form only if they do not currently participate in the Employer Access Program ("EAP"). To sign up for EAP, please speak with a customer solutions specialist at 1-888-98-GUIDE (1-888-984-8433).

1. EMPLOYER INFORMATION

Employer name: _____ Employer number: _____

City: _____ State: _____ ZIP Code: _____

I authorize GuideStone Financial Resources® to initiate debits to the bank account at the financial institution named below.

2. FINANCIAL INSTITUTION INFORMATION (VOIDED CHECK REQUIRED)

Financial institution name: _____

City: _____ State: _____ ZIP Code: _____

Name on account: _____

Routing number: _____ Account number: _____

Telephone number: (_____) _____

3. DEBIT INFORMATION

Bank accounts are debited around the 15th of the month. If the 15th falls on a holiday or during the weekend, the debit will be processed on the next GuideStone® business day. To assure the accuracy of your billing and debit transactions, changes to participant accounts must be received by GuideStone two to three days before the specified debit date.

4. SIGNATURE

I understand that all changes to participant accounts must be received by GuideStone Financial Resources two to three days before the date for automatic drafting. If the date chosen above falls on a holiday or on the weekend, the next GuideStone business day will be used for processing.

I have enclosed a voided check/debit for the bank account named above and understand prenotification of the financial institution named above must be processed at least five days before the first transmission.

This authorization will remain in effect until GuideStone receives proper notification of its termination in such time and in such manner as to afford GuideStone and the financial institution a reasonable opportunity to act on it. GuideStone reserves the right to terminate this agreement upon 30 days' notification.

Provide the name, title and signature of the authorizing officer of the church, association or institution.

Print name: _____ Date: ____/____/____

Signature: _____ Title: _____

Return this *Automated Clearing House Payment Authorization* to:

Retirement Operations
GuideStone Financial Resources
2401 Cedar Springs Road
Dallas, TX 75201-1498

