| AUTHORIZA | ATION LETTER - STREET |
|--|---|
| Address: | Date: |
| Dear Mr: | |
| to Archdiocese of Baltimore accorespective broker). I understand | orization to transfer shares of (name of security) ount (Account # for the securities will be sold by the Arch-diocal as follows: |
| | |
| My name, address and phone | e number are as follows: |
| Full Name(s): | Home Ph: |
| Full Name(s): | Home Ph: Work Ph: |
| Full Name(s):Address: | Home Ph: Work Ph: |