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FOUNDATION & FINANCE USE ONLY	
Received date:	
Assigned Account #:	

	_ Ac	COUNT INFO	RMATION SHEET		
New account:	Account(s) update	: Account #(s):			
New Account Name:					
Church Name:					
Mailing address:					
City:				State: _	Zip:
Email:				Phone: _	
District:				GCFA #:	
ACCO	OUNT PURPOSE			ASSET ALLOCAT	TION
General Investmer			% Balanced fund		
Endowment:		restricted		% Stoc	
Withdrawal Restriction				% Bone	
L	Yes No				ey Market fund
- ·	y of the endowment reso	lution	_	% Tota	
and/	or restriction(s).	L	Apply to all futur	e deposits Ma	aintain current allocation(s)
		AUTHORIZ	ED SIGNERS		
Authorized name:				Position:	
Mailing address:				_	
City:				State:	Zip:
Email:				 Phone:	
Signature:				Date:	
	Receive statements:	Email	Postal mail	No	
Authorized name:				Position:	
Mailing address:					
City:				State:	Zip:
Email:				Phone:	
Signature:				Date: _	
	Receive statements:	Email	Postal mail	No	
Authorized name:				Position:	
Mailing address:					
City:				State: _	Zip:
Email:				Phone: _	
Signature:		- <u></u>		Date: _	
	Receive statements:	Email	Postal mail	No	
Authorized name:				Position: _	
Mailing address:					
City:				State: _	Zip:
Email:				Phone: _	
Signature:				Date: _	
	Receive statements:	Email	Postal mail	No	
		HURCH COLIN	CIL CERTIFICATIO	 N	
Senior Pastor name:	Ci	.5.1.6.1.6.5.11	C:		Date:
Authorized Lay Person			Signature:		Date:
Additionized Lay Feison			Jigilatule.		Date.