



New account: \_\_\_\_\_ Account(s) update: \_\_\_\_\_ ALL Accounts \_\_\_\_\_ Account #(s): \_\_\_\_\_  
 New Account Name: \_\_\_\_\_  
 Church Name: \_\_\_\_\_  
 Mailing address: \_\_\_\_\_  
 City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_  
 Email: \_\_\_\_\_ Phone: \_\_\_\_\_  
 District: \_\_\_\_\_ GCFA #: \_\_\_\_\_

ACCOUNT PURPOSE			ASSET ALLOCATION	
General Investment			_____	% Stock fund
Endowment:	Restricted	Unrestricted	_____	% Balance Plus fund
Withdrawal Restriction(s):	Yes	No	_____	% Balance fund
<i>(Attach a copy of the endowment resolution and/or restriction(s).)</i>			_____	% Bond fund
Apply allocation to all future deposits	Apply allocation to current deposit only		_____	% Total

**AUTHORIZED CONTACTS** *(if authorized to sign for withdrawals and deposits, please check the box next to the Authorized Name)*

Authorized Name: _____	Position: _____
Mailing address: _____	
City: _____	State: _____ Zip: _____
Email: _____	Phone: _____
Signature: _____	Date: _____
Receive statements: _____	Email _____ Postal mail _____ No _____ Statement Only _____
Authorized Name: _____	Position: _____
Mailing address: _____	
City: _____	State: _____ Zip: _____
Email: _____	Phone: _____
Signature: _____	Date: _____
Receive statements: _____	Email _____ Postal mail _____ No _____ Statement Only _____
Authorized Name: _____	Position: _____
Mailing address: _____	
City: _____	State: _____ Zip: _____
Email: _____	Phone: _____
Signature: _____	Date: _____
Receive statements: _____	Email _____ Postal mail _____ No _____ Statement Only _____
Authorized Name: _____	Position: _____
Mailing address: _____	
City: _____	State: _____ Zip: _____
Email: _____	Phone: _____
Signature: _____	Date: _____
Receive statements: _____	Email _____ Postal mail _____ No _____ Statement Only _____

**CHURCH COUNCIL CERTIFICATION**

Senior Pastor name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_  
 Authorized Lay Person name: \_\_\_\_\_ Signature: \_\_\_\_\_ Date: \_\_\_\_\_