CHURCH INVESTORS FUND, INC.

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www.ChurchInvestorsFund.org

Withdrawal Request

1. Investor Information

Name: _____ **Address:** _____

City: _____ **State:** _____ **Zip:** _____ **Phone:** _____

☐ New Contact Information **Email:** _____

2. Withdrawal Information *(All fields must be completed in this section)*

Account Number: _____ **Certificate Type** (check one): ☐ Foundation ☐ Term ☐ Building Fund ☐ Ministry Fund

Withdrawal Amount: $ _____ -OR- ☐ **Full Redemption**

Withdrawal Date: _____ -OR- ☐ **At Maturity**

☐ (please check) If withdrawal date is before maturity or for non Building or Ministry Fund purposes, I acknowledge that a penalty could apply.*

***Notes** (optional):* _____

*There is an early withdrawal penalty of 1% of the amount withdrawn if Certificate is within a year of maturity and 2% of the amount withdrawn if Certificate is greater than a year from maturity.

3. Funds Distribution

☐ Check

-OR-

☐ By checking this box, I authorize Church Investors Fund to process any specific request for electronic transfers, including interest payments, to and/or from my bank or credit union account.

☐ I have attached a voided check for my transfer account.

☐ I previously established an account on file with CeIF ending in _____

4. Signatures**

Name	Signature(s)	Date

**Authorized signers for Church/Organization are indicated by the Incorporated Organization form currently on file with Church Investors Fund

Internal Use Only

Request Type ☐ Recording ☐ Renewal Form ☐ _____ Penalty ☐ 1% ☐ 2% ☐ From 100 Account

Effective Date: _____ ☐ at maturity ☐ when dividend paid

Comments: _____

Requested By: _____ Date: _____ Approved by: _____ _____

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