



North Indiana United Methodist Foundation, Inc.
Investment Service Fund
 Deposit - Transfer - Withdrawal Form

Investor Name		
Investor Address		
City	State	Zip
Account Name		
Account Number		

DEPOSITS - Please deposit the attached check into the following funds-	
Money Market Fund	\$
Short-Term Investment Fund	\$
Domestic Bond Fund	\$
Multiple Asset Fund	\$
Managed Mutual Funds*	\$
World Allocation Fund*	\$
Global Stock Fund	\$
Total of check attached	\$

**PLEASE MAKE CHECK
 PAYABLE TO:**
*North Indiana United
 Methodist Foundation*

TRANSFERS - Please make the transfers as indicated below – (If transferring investments within an account, use first column only. If transferring between accounts, use both columns).				
	Account # _____		Account # _____	
	Acct. Name # _____		Acct. Name # _____	
	From	To	From	To
Money Market Fund	\$	\$	\$	\$
Short-Term Investment Fund				
Domestic Bond Fund				
Multiple Asset Fund				
Managed Mutual Funds*				
World Allocation Fund*				
Global Stock Fund				
Total	\$	\$	\$	\$

WITHDRAWALS - Please send a check for the withdrawal(s) from our investment funds as indicated below -	
Money Market Fund	\$
Short-Term Investment Fund	
Domestic Bond Fund	
Multiple Asset Fund	
Managed Mutual Funds*	
World Allocation Fund*	
Global Stock Fund	
Total	\$

*Not socially screened.

Authorized by - Signature	
Printed Name	Date

Please send this form to: North Indiana United Methodist Foundation, Inc., 1001 N Western Ave., Suite D, Marion, IN 46952



North Indiana United Methodist Foundation, Inc. Investment Service Fund

Account Change Request Form

- This form is to be completed by the Investor any time a change in the account is required or requested. •

Investor Name		
Investor Address		
City	State	Zip
Account Name		
Account Number		

Change mailing address/attn: to -
Attn:/To
Address

Change authorized signers -
If persons authorized to sign on this account have changed, contact our office to request a Signature Card Update form.

Change statement mailing frequency to-	
<input type="checkbox"/>	Monthly
<input type="checkbox"/>	Quarterly

Request On-line Access
<input type="checkbox"/> Please send form to sign up for on-line access to our investment account information.

Automatic quarterly withdrawals -		
<input type="checkbox"/> Please send a check each quarter from the fund(s) indicated.		
	Money Market Fund	\$
	Short-Term Investment Fund	\$
	Domestic Bond Fund	\$
	Multiple Asset Fund	\$
	Managed Mutual Funds*	\$
	World Allocation Fund*	\$
	Global Stock Fund	\$
	Total	\$

*Not socially screened.

We desire the following (other) change to be made to our account: (please describe below)

Authorized by - Signature	
Printed Name	Date

Please send this form to: North Indiana United Methodist Foundation, Inc., 1001 N Western Ave., Suite D, Marion, IN 46952