

SIGNATURE CARD UPDATE

North Indiana United Methodist Foundation, Inc.
Investment Service Fund

IMPORTANT! Please complete the information requested on this card and sign your name(s) as you do when writing or endorsing checks.

Date of Update

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Account Number

--	--	--	--	--	--	--	--	--	--

Church or Agency Name _____ Account Name _____

All authorized signatories must sign below. (At least two are required)

- | | | | |
|----|-----------|------------|-------|
| 1. | _____ | _____ | _____ |
| | Signature | Print Name | Title |
| 2. | _____ | _____ | _____ |
| | Signature | Print Name | Title |
| 3. | _____ | _____ | _____ |
| | Signature | Print Name | Title |

Signatures authorized by current pastor or prior authorized signatory (sign here) _____

Print Name _____ Title _____

Please check here if this Signature Card Update supersedes an existing signature card on file. If this box is not checked we will add this new signature but will not replace old cards.