

Post Office Box 8066, Dothan, AL 36304 Phone: 334-793-6820 Fax: 334-794-6480 Email: foundation@alwfumf.org Website: alwfumf.org

SUBSCRIPTION FORM FOR CERTIFICATES OF PARTICIPATION

I/We hereby make application for investment in the Alabama-West Florida United Methodist Development Fund.

| Amount: \$ | _ (\$100.00 minimum) |
|--|----------------------|
| I/We certify that I/we have received a copy of the Offering Circular of the fund, and that I/we are members of The United Methodist Church. The Certificate of Participation is to be issued in the following name(s): | |
| Name: SSN: Please print name as it is to appear on the Certificate. | |
| Please print name as it is to appear on the Certificate. | |
| **andSSN: | |
| Please print the name of the joint tenant as it is to appear on the Certificate. | |
| **and SSN | : |
| Please print the name of the joint tenant as it is to appear on the Certificate. | |
| Mailing Address: | |
| City, State, Zip: | |
| Telephone Number: Fax Number | : |
| Email Address: | |
| | |
| Preferred method of receiving quarterly statements: US MailE-mail INTEREST is to be \Box PAID by check the last day of each quarter OR \Box REINVESTED (Please select one) | |
| Signed: | Dota |
| | |
| Signed: | Date: |
| Signed: | Date: |
| If any persons other than those above are authorized to make inquiries regarding this account, list them here: | |

Make All Checks Payable to: The Alabama-West Florida United Methodist Development Fund

** Certificates of Participation may be issued in two or three names as "Joints Tenants with Right of Survivorship".