



P.O. Box 8066
Dothan, Alabama 36304
334.793.6820
www.alwfumf.org

SUBSCRIPTION FORM FOR CERTIFICATES OF PARTICIPATION

(For United Methodist and historically Wesleyan Churches & Organizations)

We hereby make application for investment in the Alabama-West Florida United Methodist Development Fund with an opening deposit of **(Amount)** \$_____.

We certify we have received a copy of the Offering Circular of the fund. The Certificate of Participation is to be issued in the following name:

Name: _____
(Please print the full legal name of the account as it is to appear on the Certificate)

Federal Tax ID Number (if applicable): _____

Account Mailing Address: _____

City, State, Zip: _____

Telephone Number: _____ **E-mail Address:** _____

INTEREST is to be **PAID** by check the last day of each quarter or **REINVESTED**. *(Please select one)*

Authorized Signature: _____

Title: _____ **Date:** _____

Authorized Signature: _____

Title: _____ **Date:** _____

Number of signatures required to request funds from this account? _____

Are requests for funds received via email authorized by the Church? _____

Please list titles of those authorized to make such requests:

Please list title(s) of those authorized to make inquiries only:

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

* Attach applicable minutes and/or resolutions to this application.