



United Methodist
Foundation of
New England

For Office Use Only:

Initials _____ Transaction # _____

INVESTMENT DIRECTION FORM FOR *EXISTING* ACCOUNTS

Use one form per account number

This is a... **Deposit**
Checks must be made payable to UMFNE

Withdrawal
(Requires signatures of Primary Contact and Second Authorized Person)

Name of Church or Agency

_____, _____
City ST

Name of Account

<i>Date</i>	<i>*Amount</i>	<i>Account Number</i>

***Enter \$ amount you wish to deposit to or withdraw from this account. If closing account, write "CLOSE-OUT". We require a separate Deposit Form for each check being deposited. If one check is used for multiple deposits, please attach a separate Investment Direction Form for each account number. Please copy this form as needed.**

Requests to redeem or purchase units in investment accounts must be received before the last business day of the month for processing. Withdrawals from the Money Market Model may be made at any time.

SOURCE OF FUNDS:

Bequest Memorial Gift Existing Endowment Capital Campaign Other _____

Note: With regard to endowment funds, your church trustees are responsible for ensuring that the *historic dollar value* of the gift(s) made by donors or the original corpus of the endowment is preserved in accordance with state statute or common law principles relating to endowment management.

1 _____
Primary contact person signature – REQUIRED

(Please print name)

(_____) _____
Daytime Telephone

2 _____
Second authorized person signature – REQUIRED FOR WITHDRAWAL OR CLOSEOUT

(Please print name)