



**For Office Use Only:** Ack. \_\_\_\_\_

Initials \_\_\_\_\_ Transaction # \_\_\_\_\_

New Account Number \_\_\_\_\_

# NEW ACCOUNT DEPOSIT FORM

Checks made payable to UMFNE \*\*\* Use one form for each new account

Name of Church or Agency \_\_\_\_\_ City \_\_\_\_\_ State \_\_\_\_\_

Name of Account \_\_\_\_\_ Date \_\_\_\_\_

\$ \_\_\_\_\_  
Amount of Deposit

We require a separate form for each check being deposited. If one check is used for multiple deposits, please complete a separate form for each account. (Copy this form as needed.)

How do you want the Foundation to distribute interest/dividends/earnings for this account?

- Reinvest
- Pay interest out annually
- Pay interest out semi-annually
- Fixed Percentage Payout (only available on quarterly basis with Balanced Growth Model)  
*Please see our website for this year's rate*
- Pay interest out quarterly

Please choose the model you wish to invest in:

- |                       |                                     |
|-----------------------|-------------------------------------|
| Stock Model           | Capital Appreciation Model          |
| Balanced Growth Model | Weighted Growth & Income Model      |
| Balanced Income Model | Moderate Growth & Income Model      |
| Fixed Income Model    | Weighted Income & Growth Model      |
| Money Market          | Income & Capital Preservation Model |

**If no box is checked, we will automatically reinvest until instructed.**

Source of Funds:

<b>Bequest</b>	<b>Memorial Gift</b>	<b>Existing Endowment</b>	<b>Capital Campaign</b>	<b>Other</b> _____
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\_\_\_\_\_  
*Primary Contact signature - REQUIRED*

\_\_\_\_\_  
*Print Name*

(\_\_\_\_\_) \_\_\_\_\_  
*Daytime Telephone*

\_\_\_\_\_  
*Email address (for sending acknowledgement)*