



INVESTMENT WITHDRAWAL FORM

Investor Information

Applicant Name

SSN

Address

City

State

Zip

☐ Home

☐ Cell

Home Phone

Cell Phone

Preferred Phone

☐ Single

☐ Married

☐ Widow

Email

Birth Date

Marital Status

Investment Withdrawal Instructions

The undersigned elects to withdraw funds in the following amount(s). **Attach a voided check and mark Bank Account below to authorize an electronic funds transfer (EFT) of the withdrawal amount if this is a new bank account on file with CGIF.**

One-Time Withdrawal

☐ Full Disbursement

\$

Investment #

Withdrawal Amount

☐ Check (mailed within 3 business days of approval)

☐

Bank Account Ending in (Last 4) Bank Name

☐ Full Disbursement

\$

Investment #

Withdrawal Amount

☐ Check (mailed within 3 business days of approval)

☐

Bank Account Ending in (Last 4) Bank Name

Recurring Withdrawals

Please start withdrawing from my investment beginning on:

☐ Full Disbursement

\$

Investment #

Withdrawal Amount

☐ Check (mailed within 3 business days of approval)

☐

Bank Account Ending in (Last 4) Bank Name

☐ Full Disbursement

\$

Investment #

Withdrawal Amount

☐ Check (mailed within 3 business days of approval)

☐

Bank Account Ending in (Last 4) Bank Name

Please complete the Acknowledgement and Authorization section on Page 2. Thank you!



Acknowledgement and Authorization

By submitting this withdrawal request, the undersigned acknowledges that Church Growth Investment Fund will review the request for completeness and accuracy prior to approval. Processing will begin once the request is approved. Please allow up to 3 business days for electronic funds to be processed by Church Growth Investment Fund, with actual receipt dependent on the recipient's bank. Check withdrawals may require up to 3 business days after approval for processing and mailing.

Owner

Co-Owner (If Applicable)

Signature

Signature

Print Name

Print Name

Date

Date