SAVINGS CERTIFICATE PURCHASE APPLICATION



Buildings for the Life of the Church





SAVINGS CERTIFICATE PURCHASE APPLICATION

I. OWNERSHIP

NAME	NAME			
MAILING ADDRESS	MAILING ADDRESS			
CITY, STATE, ZIP CODE	CITY, STATE, ZIP CODE			
SOCIAL SECURITY OR TAX I.D. NUMBER	SOCIAL SECURITY OR TAX I.D. NUMBER			
HOME PHONE CELL PHONE	HOME PHONE CELL PHONE			
EMAIL ADDRESS	EMAIL ADDRESS			
BIRTHDATE	BIRTHDATE			
CHURCH AFFILIATION	CHURCH AFFILIATION			
CONTACT PERSON (IF PURCHASER IS NOT AN INDIVIDUAL) AND PHO	NE NUMBER			
Type of Ownership: 🗅 Individual 🗅 Joint 🗅 Organization	Trust (please include a copy of the Trust Agreement or Certificate of Trust Existence and Authority)			
Note: Joint owners are considered joint tenants with rights of su reported to the Internal Revenue Service using the Social Secur	•			

II. TERM SAVINGS CERTIFICATE

- □ Enclosed is a check for \$_____
- Debit for \$______ the financial institution account listed in Section IV.

Funds to be invested in the following term savings certificate(s).

Term		Amount (\$1,000 minimum)	Special Term (only available if listed on the current		
	1 year	\$	Term	Amoun	t
	2 year	\$		\$	•
	3 year	\$		\$	
	4 year	\$			
	5 year	\$	See rate sheet or go to www.rca.org/invest		www.rca.org/invest
	10 year	\$	to view current interest rates.		rates.
Int	erest payment options				
Reinvest interest into the certificate			🛛 Quart	erly [Semi-annually
Receive interest check			🛛 Quart	erly [Semi-annually
Receive interest into bank account electronically			🛛 Quart	erly [Semi-annually

III. DEMAND SAVINGS CERTIFICATE

□ Enclosed is a check for \$____

Debit for \$______ the financial institution account listed in Section IV.

Funds to be invested in a demand savings certificate (\$10,000 minimum)

Online access: Demand savings certificate activity and balances can be viewed online. Check if you want to set up online access. 🖵

IV. ELECTRONIC FUNDS TRANSFER

The following transactions can be done electronically between your financial institution account and CGF savings certificate.

- Fund initial investment to open a term or demand savings certificate.
- Invest additional funds into a demand savings certificate or receive a partial or complete redemption of your demand savings certificate. This can be initiated by completion of a Demand Savings Certificate Investment or Redemption form found at www.rca.org/cgfforms or call 888-722-4958. Subject to additional terms outlined in the Offering Circular.
- Deposit the interest received from your term savings certificate.

The CGF is authorized to initiate the transactions listed above, as indicated herein, as requested in Sections II and/or Section III, with the financial institution account described below, and to take corrective action in the event of any erroneous credits or debits to or from my account. This authority will continue until 30 days after receipt by the CGF of written cancellation of the authority.

Financial Institution:

Account number:

____ ABA number: ___

Type of account: Checking Checking Savings A VOIDED CHECK OR SAVINGS SLIP IS REQUIRED.

V. AUTHORIZED SIGNERS (if owner is an organization or trust)

	SIGNATURE OF AUTHORIZED SIGNER			
EMAIL	DAYTIME PHONE			
	SIGNATURE OF AUTHORIZED SIGNER			
EMAIL	DAYTIME PHONE			

VI. ACKNOWLEDGEMENT

I hereby represent, warrant, and acknowledge that (1) I have received or reviewed the offering circular at www.rca.org/cgfforms of The Reformed Church in America Church Growth Fund, Inc. (CGF); (2) I qualify to purchase savings certificates under the terms stated in the offering circular; (3) I am, and was at the time of receiving or reviewing the offering circular and all other communications concerning the savings certificates, a resident of the State of ________, and (4) I am purchasing the savings certificate(s) for the account of the owner listed above and not on behalf of any other person or entity. I hereby subscribe to purchase the savings certificate(s) in the amount(s) shown above and accept the terms of the offering circular. If the application is joint, the owner s authorize the CGF to take action from either owner. If the owner is a trust or organization, the undersigned certifies that they and the authorized signers designated above have the authorization to act and sign on the behalf of the entity.

Under penalties of perjury, I certify that:

- (1) the number shown on this form is my correct taxpayer identification number.
- (2) I am not subject to backup withholding of taxes due to failure to report interest and dividend income.
- (3) I am a U.S. citizen or other U.S. person (as defined in the instructions to Form W-9).

Note: Cross out paragraph (2) if you have been notified that you are subject to backup withholding because you failed to report all interest and dividends on your tax return.

This application is subject to acceptance by the CGF.

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

X				
Signature	Date	Date		
x				
Signature	Date			
If sending funds using a check, make check payable to RCA Church Growth Fund, Inc. a application and check to: RCA Church Growth Fund, P.O. Box 76, Orange City, IA 51041				

If you have questions or need additional information, please call 888-722-4958 or email cgf@rca.org.

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