

# Authorized Contact Form

## Church/District Information

Name	TIN	Date	
Address	City	State	Zip
Phone	Email	Fax	

### Authorized Contacts (All loan accounts and investments are viewable by all authorized contacts)

This document replaces any previous authorized contacts. For each contact, check the appropriate level of authorization. This will authorize AG Financial Solutions to allow the authorized contact(s) listed below access to information regarding the account(s) and/or investment(s) as designated. Authorized contacts must also provide the account number when contacting Loan Servicing. If designated as an authorized signer, additional access is granted to conduct transactions on the owner's behalf.

1) \_\_\_\_\_

Print Name	Signature	Title (if applicable)
_____	_____	_____
Email _____ Phone _____	<input type="checkbox"/> Church Loan Authorized Signer, Acct No. _____ <input type="checkbox"/> Authorized Signer*, Investment No. _____ <input type="checkbox"/> Communication Only (not authorized signer) _____	

2) \_\_\_\_\_

Print Name	Signature	Title (if applicable)
_____	_____	_____
Email _____ Phone _____	<input type="checkbox"/> Church Loan Authorized Signer, Acct No. _____ <input type="checkbox"/> Authorized Signer*, Investment No. _____ <input type="checkbox"/> Communication Only (not authorized signer) _____	

3) \_\_\_\_\_

Print Name	Signature	Title (if applicable)
_____	_____	_____
Email _____ Phone _____	<input type="checkbox"/> Church Loan Authorized Signer, Acct No. _____ <input type="checkbox"/> Authorized Signer*, Investment No. _____ <input type="checkbox"/> Communication Only (not authorized signer) _____	

4) \_\_\_\_\_

Print Name	Signature	Title (if applicable)
_____	_____	_____
Email _____ Phone _____	<input type="checkbox"/> Church Loan Authorized Signer, Acct No. _____ <input type="checkbox"/> Authorized Signer*, Investment No. _____ <input type="checkbox"/> Communication Only (not authorized signer) _____	

\*AG Loan Fund transactions require two Signers for institutions and a Corporate Resolution attached to this form.

### Authorization Agreement for Authorized Contact

AG Financial Solutions/AG Loan Fund is not liable for any improper, fraudulent, or otherwise unauthorized transactions based on reliance of this form. It is understood that AG Financial Solutions/AG Loan Fund undertakes no obligations to monitor transactions to determine that they are on the owner's behalf. Notification must be made to AG Financial Solutions/AG Loan Fund immediately if unauthorized access to the account/investment is suspected.

**Online Access.** Upon receipt of this form in our office, online access is available for the viewing of your accounts/investments. Call 800.253.5544 to create online access. It is recommended that your online access be set up to use a generic email address, such as your church email address, for ease of use by multiple users. Once the church has established online access, it is solely responsible for the distribution of the login information. Note that once online access is made available to a user, **all accounts and investments are viewable.**

Printed Name of Senior Pastor/Superintendent	Signature of Senior Pastor/Superintendent	Date
_____	_____	_____