

ACH INVESTMENT AUTHORIZATION

Initiates automatic monthly contributions from your personal bank account into your IRA or Coverdell ESA.



Investor and Bank Information

Investment Number _____

Owner Name _____ Date of Birth _____ Social Security Number _____

Bank Name _____ Bank Address _____ City _____ State _____ Zip _____

Bank Account Number _____ Bank ABA Number (Bottom left corner of check) _____ Checking Savings

Contribution Information

Select all that apply. All changes should be received by us seven (7) working days prior to your next scheduled ACH contribution.

- New Investment/ACH Authorization Change of Bank Information on File
 Change of Existing Investment/ACH Authorization Cancel Investment/ACH Authorization

Investment Election

Select one. A separate form is required for each investment type. All IRA and Coverdell ESA contributions will be designated for the current year.

- Traditional Adjustable IRA 5-Year Certificate Roth Adjustable IRA 5-Year Certificate
 Coverdell ESA Adjustable 5-Year Certificate

Investment Amount

The minimum required investment amount may be waived if a \$50 minimum monthly investment is established, provided the monthly contributions continue until the required minimum investment is met. If automatic investments are cancelled prior to meeting the required minimum investment, you will be assessed a \$50 annual fee. Automatic contributions will be made on the 5th or 15th of every month or the first business day thereafter. If investments are rejected because of insufficient funds in your bank account for two consecutive months or three times during a year, any established automatic investments will be revoked. In the event of a stop payment of a draft or a closing of your bank account without prior notification to Assemblies of God Loan Fund ("AG Loan Fund") and/or AGCU, we may revoke your authorization for automatic investments.

- 5th of month \$ _____ 15th of month \$ _____

Authorization Agreement for Automatic Debits

Please include a voided check or savings deposit ticket with this form. Without it, you may experience a delay establishing your automatic contributions.

This will authorize AG Loan Fund and/or AGCU to initiate debit entries and to initiate, if necessary, credit entries and adjustments for any debit entries in error to the bank account indicated and further authorize AG Loan Fund to invest the amount indicated in the specified investment. This authorization is to remain in force until AG Loan Fund and/or AGCU has received written notice of its termination in such time and in such manner as to afford AG Loan Fund and/or AGCU and your bank a reasonable opportunity to act on it. This authorization does not change the terms of your contract.

This will authorize the bank indicated on the enclosed voided check for checking accounts or savings deposit ticket for savings accounts, and as listed below, to debit and/or credit the same to the investment.

AG Financial Solutions and AGCU Information

I understand and agree that in directing you to complete this transaction, that AG Loan Fund and AGCU assume or incur no liability as to the authenticity of the asset purchased, the appropriateness or worthiness of the investment, or otherwise. AG Loan Fund's and AGCU's only responsibility is to determine if what is purchased agrees with the direction of this investment authorization and my agent's confirmation (if any). I have made my own investigation of the risks involved in making this investment and I understand those risks. I understand that I am responsible to make any necessary changes to this authorization to ensure that I do not exceed federal IRA/Coverdell ESA contribution limits, if applicable. I do hereby indemnify and hold forever harmless AG Loan Fund, AG Financial Solutions ("AGFS"), and AGCU, its officers, employees, directors, successors, and assigns of and from any claim which may arise or result from purchase of the investment authorized hereby. Each deposit will be credited and reported as a normal contribution for the tax year in which it is received.

Release of Custodial Account Information

I Hereby Acknowledge that:

I. **Authorization:** AGFS ("Trustee") and AGCU ("Custodian") are hereby authorized to release balance information to representatives of **AG Loan Fund**. I understand that this allows the representatives or successors of AG Loan Fund who sold me the investment in my IRA to know the status of my investment. Upon signing of this release, the Trustee may release my investment information to the AG Loan Fund representative on his request.

II. **Release of Liability:** I hereby release and agree to hold harmless AGFS and AGCU from all liability arising out of the release of all IRA or ESA information.

X

IRA Owner/Responsible Individual Signature _____

Printed Name _____

Date _____