

1
GENERAL INFORMATION

Name of Church/Institution	Tax ID Number	Date
Address	City	State
		Zip

2
AUTHORIZED AGENTS

At least two authorized agents must be listed, and if the institution is a church, Authorized Agent 1 below must be the senior pastor. Only those persons listed below will be granted authorized agent authority.

AUTHORIZED AGENT 1

Print Name and Title

Email

Phone

Signature

AUTHORIZED AGENT 2

Print Name and Title

Email

Phone

Signature

AUTHORIZED AGENT 3

Print Name and Title

Email

Phone

Signature

AUTHORIZED AGENT 4

Print Name and Title

Email

Phone

Signature

3
CERTIFICATION AND SIGNATURES

This form replaces any and all previous Authorized Agent forms on file. AGFinancial and its affiliated entities (including, but not limited to, Assemblies of God Ministers Benefit Association, Assemblies of God Foundation, Assemblies of God Loan Fund, Assemblies of God Loan Pool, LLC, and Foundation Capital Resources, Inc.) hereinafter referred to as AGFinancial, is not liable for any improper, fraudulent, or otherwise unauthorized transactions based on reliance of this form. AGFinancial undertakes no obligations to monitor transactions to determine that they are on the owner's behalf. AGFinancial reserves the right to require documentation in addition to this form for certain products, including, but not limited to, church loans.

By signing below, we certify and agree that AGFinancial may allow the agents listed above access to information regarding the church's/institution's holdings with AGFinancial, and/or the ability to conduct transactions on its behalf. We will notify AGFinancial immediately if unauthorized access is suspected.

Pastor/Corporate Officer Signature (Required)	Printed Name and Title	Date
Corporate Officer Signature (Required)	Printed Name and Title	Date