



Methodists Helping Methodists

F O U N D A T I O N

Transfer Funds (Churches / Organizations)

This is form is for transfers and investment changes within or between your foundation accounts. Please use Withdrawal Form if you wish to move funds from Foundation to your bank account. Please complete all lines or write N/A if it does not apply. Incomplete forms may delay your request.

Date _____ Account Owner Name _____
(Person, Church, or Organization)

Address _____

City _____ State _____ Zip _____

Contact Name _____

Phone _____ - _____ - _____ Email _____

FROM Account Number: _____ Account Name: _____

Investment type (if applicable) _____

TO Account Number: _____ Account Name: _____

Investment type (if applicable) _____

____ One-time transfer amount \$ _____ OR
____ Periodic transfer amount \$ _____ Monthly or Quarterly

From: Principal Earnings

Reason for Transfer: _____

NOTE: Transfers of principal from Endowment Accounts must include meeting minutes with this form.

____ Please use the paperless, no signatures required process. I have listed the names and contact information for the authorized signers to contact by phone.

Authorized signers:

(1) Signature: _____ Title/Position: _____

Print Name: _____ Phone or Email: _____

(2) Signature: _____ Title/Position: _____

Print Name: _____ Phone or Email: _____

E-mail Address for Receipt Confirmation: _____

PLEASE NOTE: Transfer requests from Fixed Income Fund, Balanced Fund and Equity Growth Fund accounts must be received by the Foundation no later than noon on the last business day of the month. Transfers from these accounts are effective the first day of the following month.

Send to: 7350 E Progress Pl, Ste 205, Greenwood Village CO 80111
info@MHMFN.org Fax: 303-777-6292