

APPLICANT INFORMATION PLEASE PRINT CLEARLY.				
Church/Organization Name:				
Street Address:				
City/State/Zip:				
Phone:	Email:			
Tax ID/EIN #:				
Signer Name 1:	Signer Name 2:			
Contact Name:				
INVESTMENT SELECTION	24-Month Term Note Minimum \$500 investment	_ 60-Month Term Note with		
Flexible Demand Note Minimum \$50 investment	36-Month Term Note	Giving Bonus If selected, choose Giving Bonus(es)		
Flexible Demand Plus Note Minimum \$100 monthly ACH deposit	36-Month Creation Care Term Note Minimum \$500 investment at 3.000% per annum	LGBTQIA+ Giving Bonus Minimum \$2,500 investment		
3-Month Term Note Minimum \$500 investment	36-Month Disaster Care Term Note Minimum \$500 investment at 3.000% per annum	Racial Equity Giving Bonus Minimum \$2,500 investment		
6-Month Term Note Minimum \$500 investment	60-Month Term Note Minimum \$500 investment	Church Giving Bonus Minimum \$10,000 investment		
12-Month Torm Note	Special Term Note (please specify below)	Mission Giving Bonus		
12-Month Term Note Minimum \$500 investment		Minimum \$25,000 investment		
INVESTMENT SOURCE PLEASE New Investment by Check \$	ed Church of Ce (#) ee Principal Only Portion of Note (\$	ment by ACH \$hecking Account (attached voided check) avings Account (attached deposit slip) Account # Routing #		
INVESTMENT SOURCE PLEASE New Investment by Check \$ Check enclosed. All checks payable to the Unite Christ Cornerstone Fund, Inc. Reinvestment of Matured Not PLEASE SELECT ONE ■ Entire Balance	ed Church of Class See (#) Principal Only Portion of Note (\$)	ment by ACH \$hecking Account (attached voided check) avings Account (attached deposit slip) Account # Routing #		
INVESTMENT SOURCE PLEASE New Investment by Check \$	ed Church of Cle ie (#) ie Principal Only Portion of Note (\$) LEASE SELECT ONE	ment by ACH \$hecking Account (attached voided check) avings Account (attached deposit slip) Account # Routing #		
INVESTMENT SOURCE PLEASE New Investment by Check \$	te (#) Principal Only Portion of Note (\$) LEASE SELECT ONE Int semi-annually	ment by ACH \$hecking Account (attached voided check) avings Account (attached deposit slip) Account # Routing #)		
INVESTMENT SOURCE PLEASE New Investment by Check \$ Check enclosed. All checks payable to the Unite Christ Cornerstone Fund, Inc. Reinvestment of Matured Note PLEASE SELECT ONE Entire Balance Transfer From Note (# INTEREST DISTRIBUTION PLACETURE (add) to my investment	te (#) e Principal Only Portion of Note (\$) LEASE SELECT ONE Int semi-annually Quarterly Monthly Direct Deposit to bank account (attached vo	ment by ACH \$hecking Account (attached voided check) avings Account (attached deposit slip) Account # Routing #) o Living Stones Endowment of (for balances of \$10,000 or more)		
INVESTMENT SOURCE PLEASE New Investment by Check \$ Check enclosed. All checks payable to the Unite Christ Cornerstone Fund, Inc. Reinvestment of Matured Note PLEASE SELECT ONE Entire Balance Transfer From Note (# INTEREST DISTRIBUTION PLEASE SELECT ONE PLEASE SELECT ONE PLEASE SELECT ONE PLEASE SELECT ONE	te (#) ed Church of ie (#) e	ment by ACH \$hecking Account (attached voided check) avings Account (attached deposit slip) Account # Routing #) o Living Stones Endowment of (for balances of \$10,000 or more)		



ORGANIZATION INVESTMENT APPLICATION

FOR FLEXIBLE DEMAND NOTES ONLY PLEASE PRINT CLEARLY			
withdrawal in the amount of \$ 15th of each month. I also authorize the Unit	erstone Fund, Inc. and the respective Bank to initiate a monthly (a required minimum \$100 per month) on the (circle one) 1st or ted Church of Christ Cornerstone Fund, Inc. and the respective Ban ries or adjustments for any debit/credit in error to my account lister	k	
ACCOUNT TYPE PLEASE SELECT ONE			
☐ Checking Account (attached voided check	k)		
☐ Savings Account (attached deposit slip)	Routing #		
_	Account #		
Church of Christ church, Association, Confere Name of Church or Entity:	RM NOTES ONLY PLEASE PRINT CLEARLY (a minimum of 10% of the note amount) to the following Unite ence, or related organization or entity as a gift. Contact Name:		
	City/State/Zip:		
CERTIFICATIONS			
and further represent that I/we are members of, co Church of Christ or the Cornerstone Fund or in any Church of Christ or the Cornerstone Fund, or in any other entity which is missionally aligned with the C having a reasonable association or affiliation with family members of persons in the Limited Class, (2 Limited Class, (3) employees of the Cornerstone F	ular of the United Church of Christ Cornerstone Fund, Inc. (Cornerstone Fund) ontributors to (including previous investors), or participants in the United by program, activity or organization which constitutes a part of the United by other Faith-Based Organization, grant-making organization, foundation of Cornerstone Fund, (the "Limited Class"), or such other persons or entities in the Limited Class, as determined by the Cornerstone Fund, such as (1) (2) entities controlled by or under common control with members of the Fund or any organizations affiliated with the United Church of Christ, and (and investors that are nonprofit religious organizations.	or	
number, and (2) that I am not subject to backup w	t the number shown on the forms is my correct taxpayer identification vithholding because (a) I have not been notified that I am subject to backuperest or dividends, or (b) the Internal Revenue Service has notified me that		
	E SECURITIES DESCRIBED IN THIS APPLICATION HAS THE RIGHT	_	
	IN TWO BUSINESS DAYS. SEE PAGES III AND IV OF THE OFFERING	G	
	IORE INFORMATION AND INSTRUCTIONS.		
SIGNATURES By signing this application, I agree to the	e certification statements on page two of this application.		
Authorized Signature	Date	_	
Authorized Signature	Date	_	

MAKE ALL CHECKS PAYABLE TO THE UNITED CHURCH OF CHRIST CORNERSTONE FUND, INC.

To confirm acceptance, the Cornerstone Fund, Inc. will mail to the person to whom interest on the Note is payable an executed copy of the Note purchased

1300 East 9th Street, #1605 Cleveland, Ohio 44114

888-UCC-FUND (822-3863) - cornerstonefund.org