

DEPOSIT FUND APPLICATION - ORGANIZATION

SEND TO:

THE CANADIAN CONFERENCE OF THE
MENNONITE BROTHERS CHURCH OF NORTH AMERICA
1310 Taylor Avenue, Winnipeg MB R3M 3Z6
Tel: (204) 669-6575 Fax: (204) 654-1865 Toll-free: 1-888-669-6575
Email: stewardship@mbconf.ca Web Site: www.mbconf.ca/stewardship

OFFICE USE ONLY Deposit Account Number _____
--

BY:

Name: _____ Business Number _____

Address: _____

Contact Name: _____ Phone: _____ Email: _____

Home Church: _____ Amount of Initial Deposit: _____

Required Documents: For corporations, a copy of the Certificate of Incorporation and Articles is attached.
For unincorporated private businesses, proof of registration of the business name is attached.

I/We hereby apply for a Deposit Fund Account with you.

- Interest on this account will be compounded semi-annually and added to the account.
- Special Instructions: _____

- Interest rates will be set by you semi-annually.
- I/We understand that the Deposit Fund is invested in:
 - ◆ Loans to Mennonite Brethren conferences, churches, institutions, pastors and conference workers,
 - ◆ Bank and government related securities and accounts,
 - ◆ High quality corporate bonds
 - ◆ Real estate holdings.
- I/We authorize commingling of my/our deposits and interest, with other investment assets held by you.
- Withdrawals may be made at any time without interest penalty.
- Number of signatures required for withdrawals from, or changes to the account: _____
- Below are the names, positions, and signatures of all signing officers.

_____ Name	_____ Position	_____ Signature	_____ Date
_____ Name	_____ Position	_____ Signature	_____ Date
_____ Name	_____ Position	_____ Signature	_____ Date
_____ Name	_____ Position	_____ Signature	_____ Date