

## THE EPISCOPAL CHURCH IN WESTERN OREGON INVESTMENT FUNDS ACCOUNT TRANSFER INSTRUCTIONS

Date.		
Account Holder Name on Fund:		Account Number:
Total Transfer	Amount:	
We would like	e to make the following trans	fer within our investment funds for the above stated amount.
Transfer Fron	n:	
	Long-Term Investment	DIF (xxx4332)
	Short-Term Investment	STIF (xxx4761)
	Socially Responsible Fund	SRIF (xxx4340)
Transfer To:		
	Long-Term Investment	DIF (xxx4332)
	Short-Term Investment	STIF (xxx4761)
	Socially Responsible Fund	SRIF (xxx4340)
appropriate aut transfer.	hority within our church and the	he person(s) signing below have the approved authority to execute this
I hereby acknowle	dge and represent that I am authori:	zed to sign this form and direct the transfers requested above.
Accour	nt Owner/Representative	
	Signature	
	Print Name	
	 Title	

Please send complete form to Charitable Managed Custody (CMSSupport@53.com) and Mike Penfield (mike.penfield@gmail.com).

Mailing Address: P.O. Box 22310, Milwaukie, OR 97269 Milwaukie: 2780 SE Harrison St., Suite 202, Milwaukie, OR 97222 Coos Bay: 420 Highland Ave, Coos Bay, OR 97420