

This banking information will be saved on file indefinitely until updated or requested to be removed.

A CURF team member will contact you at the number we have listed on record to verbally confirm information.

A. Client Information	
Name: _____ <small style="display: flex; justify-content: space-between; width: 100%;">First M.I. Last</small>	Date Submitted: _____
Name of Organization (if applicable): _____	Investment/Loan #: _____ Save banking info for: <input type="checkbox"/> This investment/loan <b>only</b> <input type="checkbox"/> <b>All</b> my investment/loans
Mailing: _____ <small style="display: flex; justify-content: space-between; width: 100%;">Address City State Zip Code</small>	
Phone: _____	Email (optional): _____
B. Bank Information	
Name of Bank: _____	Transfer method: <input type="checkbox"/> ACH <input type="checkbox"/> Wire (\$12 fee)
	Account type: <input type="checkbox"/> Checking <input type="checkbox"/> Savings
Account #: _____	Routing #: _____
<i>An agent of CURF will call the phone number saved on file to verify banking information with you verbally. Loan payments <b>must</b> use the ACH transfer method. Please confirm with your bank what your routing number is, as some banks use a different routing number for ACH transfers than for domestic wire transfers. The routing number on the bottom of checks is for ACH transfers.</i>	
C. Borrowers Only (check all that apply)	
I authorize CURF to pull from my account monthly:	
<input type="checkbox"/> Required minimum payment (refer to promissory note) \$ _____; On this date each month: _____	
<input type="checkbox"/> Extra towards principal (specify): \$ _____; On this date each month: _____	
D. Investment Only (check all that apply)	
<input type="checkbox"/> I authorize CURF to pull from my account <b>monthly</b> this amount-\$ _____ On this date each month: _____	
<input type="checkbox"/> I authorize CURF to pull from my account <b>on-time</b> this amount-\$ _____ On this date: _____	
E. Certification	
<b>I hereby certify that I am the afore-named person, and (for organizations) that I am duly authorized to execute electronic transactions. I hereby certify that, to the best of my knowledge, the provided information is true and accurate.</b>	
Signed: _____	Date: _____
F. FOR OFFICE USE ONLY	
I have verified verbally with the above individual the information provided above: <input type="checkbox"/> Yes <input type="checkbox"/> No	
Signed: _____	Date: _____

## Making Ministry Possible