

# DEPOSIT TICKET

Name \_\_\_\_\_

Date \_\_\_\_\_

Church Name \_\_\_\_\_

Address \_\_\_\_\_

City/State/Zip \_\_\_\_\_

Phone \_\_\_\_\_

Account No.: \_\_\_\_\_ (If split, give all account numbers.)

Deposit to: \_\_\_\_\_ (If split, segregate amounts.)

	Amount
<input type="checkbox"/> Income Fund	\$ _____
<input type="checkbox"/> Balanced Fund	\$ _____
<input type="checkbox"/> Equity Fund	\$ _____
<input type="checkbox"/> As Instructed on acct. documents	\$ _____

For email confirmation, please list your email address: \_\_\_\_\_

Signature: \_\_\_\_\_

