



**SYNOD OF THE PACIFIC
MISSION DEVELOPMENT CERTIFICATE (MDC)
APPLICATION FORM (Rev-05/01/09)**

Certificate Holder:
Church/Organization _____ Presbytery _____

Address, State, Zip _____

Pin # _____ Federal Identification Number: _____

We request (Please mark as applicable):

THE PURCHASE of a **NEW** MDC in the amount of \$ _____ Account Name _____
OR

A RENEWAL of our **CURRENT** MDC, Certificate # _____ Amount: \$ _____
OR

A TRANSFER FROM our **CURRENT** Custodial Account, PIN# _____ Amount: \$ _____

FOR THE FOLLOWING TERM:

6-month MDC @ 3.750%, **1-year MDC @ 4.000%**, **2-year MDC @ 4.200%**, **3-year MDC @ 4.400%**
(The minimum to open: \$20,000.00. Mission Development Certificates are not redeemable, under any circumstances, during the term of the note.)
OR

We request a (Please mark as applicable):

REDEMPTION of our **MATURED** MDC, Certificate # _____, and further request the funds:

BE TRANSFERED BACK to our **Custodial Account**, PIN# _____,

Total Amount (Principal and Interest) **Interest Only, or**

BE MAILED BY CHECK for: **Total Amount** **Interest Only, or**

Other (please specify) _____

Signature of Authorized
Representative of Purchaser: _____ **Date** _____

Names of Contact persons for this account (please type or print clearly):
_____ **Phone number** _____ **email** _____
_____ **Phone number** _____ **email** _____

MAIL INVESTMENT DEPOSITS (\$\$) TO:
Mailstop 62846
SYNOD OF THE PACIFIC – ATT: Investment Service
P.O. Box 3787
Santa Rosa, CA 95402-3787

FAX THIS APPLICATION TO 707.765.4467, or EMAIL TO: ani@synodpacific.org or MAIL TO:
Synod of the Pacific, Ani Lelea, Investment Coordinator, 200 Kentucky Street, Suite B, Petaluma, CA 94952-3825

Questions? Please contact Ani Lelea at ani@synodpacific.org, or call 1.800.754.0669, Ext. 11.

Thank you for supporting the Synod of the Pacific Investment and Loan Service