

ROCKY MOUNTAIN CONFERENCE
UNITED METHODIST FOUNDATION, INC.
3333 S. Bannock St.
Suite 205
Englewood, CO 80110
303/778-6370{office}
303/777-6292{fax}

WITHDRAWAL REQUEST

CHURCH OR AGENCY

NAME OF FUND

Account number

ADDRESS

Amount to be withdrawn:

From:

___Principal ___Earnings ___Money Market

Reason for withdrawal: _____

Email address for receipt confirmation: _____

Withdrawal authorized by:

Name: _____

Position: _____

Name: _____

Position: _____

Name: _____

Position: _____

Date: _____

PLEASE NOTE:

Fixed Income or Equity Growth Accounts- Complete & send this form to the Foundation Office by the 25th of the MONTH, payments will be made by the 15th of the following month and mailed.

Money Market Accounts - Complete & send this form to the Foundation office, payment will be mailed within 24 hours of receipt.