



# 90 Day Demand Note

Southern Union Revolving Fund, INC.  
PO Box 923868, Norcross, GA 30010-3868  
Ph. 770-408-1800 Fax 770-408-1801

Conference/Organization: \_\_\_\_\_

Local Church: (for personal accounts only) \_\_\_\_\_

Address: \_\_\_\_\_

Email: \_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_

**Please complete form and submit to your local Conference office.**

\_\_ 00 \_\_ \_\_ \_\_ \_\_ Revocable Trust with Conference/Union as Trustee (Conference will obtain EIN)

\_\_ 01 \_\_ \_\_ \_\_ \_\_ Non-trust Demand Note

\_\_ 02 \_\_ \_\_ \_\_ \_\_ Church, School, or Conference Entity

\_\_ 03 \_\_ \_\_ \_\_ \_\_ Self-administered Revocable Trust (attach copy of Certificate of Trust)

Date: \_\_\_\_\_ \$1,000 minimum required to open an account. (For personal accounts there is the option to send the check directly to SURF.)

Name: \_\_\_\_\_ SSN or EIN: \_\_\_\_\_

Second Name: \_\_\_\_\_ SSN : \_\_\_\_\_

Address: \_\_\_\_\_ County: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_ Phone: \_\_\_\_\_

The interest will change when there is a significant fluctuation in the money market in general.

**Check one:**

Interest accrue OR  If the account balance is greater than \$10,000, interest will be paid quarterly

**Certification:**

Under penalties of perjury, I/we certify that:

1. The number(s) shown on this form is/are my correct taxpayer identification number(s); AND
2. I am not subject to backup withholding because (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or divide
3. I am a US person (including a US resident alien).

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

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

**Non-trust demand note beneficiary designation:**

Pay on death to:

Name: \_\_\_\_\_ % \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ SSN: \_\_\_\_\_

Name: \_\_\_\_\_ % \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_ SSN: \_\_\_\_\_

Church Membership Verified by: \_\_\_\_\_

Conference Representative

