AUTHORIZATION FOR FINANCIAL TRANSACTION BY TELEPHONE



TODAY'S DATE

PO Box 19700, Irvine, CA 92623-9700 Fax: 866.303.9360

OWNER	(MY INFORMATION HAS CHANGED, PLEASE UPDATE,)
Name (First/Mi/Last)	Address	
Social Security Number	City State Zip	
Date of Birth	Email Address	
Rim Number Investment Number	Phone	
CO-OWNER	(MY INFORMATION HAS CHANGED, PLEASE UPDATE,)
Name (First/Mi/Last)	Address	
Social Security Number	City State Zip	
Date of Birth	Email Address	
Rim Number Investment Number	Phone	
AUTHORIZATION FOR TRANSACTIONS PASSCODE FOR TRANSACTIONS	over the phone:	
AUTHORIZATION FOR TRANSACTIONS PASSCODE FOR TRANSACTIONS I will supply the following personal information or passcode to verify my identity		
AUTHORIZATION FOR TRANSACTIONS PASSCODE FOR TRANSACTIONS I will supply the following personal information or passcode to verify my identity Account Owner Passcode or City of Birth	Co-Owner Passcode or City of Birth	
AUTHORIZATION FOR TRANSACTIONS PASSCODE FOR TRANSACTIONS I will supply the following personal information or passcode to verify my identity	Co-Owner Passcode or City of Birth	1S
AUTHORIZATION FOR TRANSACTIONS PASSCODE FOR TRANSACTIONS I will supply the following personal information or passcode to verify my identity Account Owner Passcode or City of Birth By submitting this Authorization, I/we authorize representatives of Church Dev	Co-Owner Passcode or City of Birth	ment
AUTHORIZATION FOR TRANSACTIONS PASSCODE FOR TRANSACTIONS I will supply the following personal information or passcode to verify my identity Account Owner Passcode or City of Birth By submitting this Authorization, I/we authorize representatives of Church Devas instructed by me on the telephone, through the Investment Contact Center: INVESTMENTS AND REDEMPTIONS Make financial transactions in the form of one time contributions or	Co-Owner Passcode or City of Birth elopment Fund, Inc. ("CDF") to execute the following types of transaction UNAVAILABLE TRANSACTIONS *Redemptions requiring two signatures for redemption and all retiren accounts requires signed withdrawal forms, and cannot be accomplish telephone transactions. CANCELLATION OF AUTHORIZATION	nent ned via
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AUTHORIZATION FOR TRANSACTIONS PASSCODE FOR TRANSACTIONS I will supply the following personal information or passcode to verify my identity Account Owner Passcode or City of Birth By submitting this Authorization, I/we authorize representatives of Church Devas instructed by me on the telephone, through the Investment Contact Center: INVESTMENTS AND REDEMPTIONS Make financial transactions in the form of one time contributions or redemptions. Exceptions apply.* CHANGE OF PERSONAL INFORMATION Make a change of personal information, including address, phone number and/or email address. RENEWAL AND CHANGE TO ACCOUNTS	Co-Owner Passcode or City of Birth elopment Fund, Inc. ("CDF") to execute the following types of transaction UNAVAILABLE TRANSACTIONS *Redemptions requiring two signatures for redemption and all retiren accounts requires signed withdrawal forms, and cannot be accomplish telephone transactions. CANCELLATION OF AUTHORIZATION If at any time a cancellation of the "Authorization for Financial Transact by Telephone" is desired, the investor(s) must issue a signed request to	ment led via
AUTHORIZATION FOR TRANSACTIONS PASSCODE FOR TRANSACTIONS I will supply the following personal information or passcode to verify my identity Account Owner Passcode or City of Birth By submitting this Authorization, I/we authorize representatives of Church Devas instructed by me on the telephone, through the Investment Contact Center: INVESTMENTS AND REDEMPTIONS Make financial transactions in the form of one time contributions or redemptions. Exceptions apply.* CHANGE OF PERSONAL INFORMATION Make a change of personal information, including address, phone number and/or email address. RENEWAL AND CHANGE TO ACCOUNTS Renew or change the term of an account. Available for retirement accounts. RECURRING TRANSACTION AUTHORIZATION Initiate, modify, or stop recurring contributions or redemptions. Exceptions	Co-Owner Passcode or City of Birth elopment Fund, Inc. ("CDF") to execute the following types of transaction UNAVAILABLE TRANSACTIONS *Redemptions requiring two signatures for redemption and all retiren accounts requires signed withdrawal forms, and cannot be accomplish telephone transactions. CANCELLATION OF AUTHORIZATION If at any time a cancellation of the "Authorization for Financial Transact by Telephone" is desired, the investor(s) must issue a signed request to CDF stating that this Authorization be discontinued. CDF will process	ment led via

SIGNATURE OF CO-OWNER TODAY'S DATE

SIGNATURE OF OWNER