

For office use only

Security Number: \_\_\_\_\_  
Interest Rate: \_\_\_\_\_  
Representative: \_\_\_\_\_



**UNITED PENTECOSTAL CHURCH DEVELOPMENT FUND, INC.  
d/b/a United Pentecostal Church Loan Fund**

**CHANGE IN BENEFICIARY DESIGNATION**

The undersigned owner of United Pentecostal Church Development Fund Investment Certificate(s) issued under the terms of the United Pentecostal Church Development Fund, Inc. d/b/a United Pentecostal Church Loan Fund Offering Circular dated April 1, 2017. hereby requests the following changes to his/her Beneficiary Designation as indicated in Part III of the Purchase Application and Agreement.

\_\_\_\_\_  
Name Certificate Number Social Security or Tax I.D. Number

\_\_\_\_\_  
Name (If Certificate is Jointly Held) Certificate Number Social Security or Tax I.D. Number

**PAYMENT ON DEATH** (Please attach a separate sheet for additional beneficiaries)

By completing this section, you authorize us to pay the principal and accrued interest on your Certificate to the named beneficiary, custodian or Section 501(c)(3) tax-exempt organization designated below, after your death (or in the case of joint tenants, after both of your deaths). Please fill-in the name, address and social security number (or Tax I.D. number) of your intended beneficiaries. Beneficiary designations may be changed or revoked by notice sent to us prior to the death of the Certificate holder. If you would like to designate the United Pentecostal Church International or a specific affiliated church, ministry or fund as your designated beneficiary, please fill-in the name of the UPCI or UPCI affiliated church ministry or fund.

**Transfer on Death to**

\_\_\_\_\_  
Name Relationship Social Security or Tax I.D. Number

\_\_\_\_\_  
Address City State Zip

\$ \_\_\_\_\_ or \_\_\_\_\_ % of Certificate to above named beneficiary.

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Name Relationship Social Security or Tax I.D. Number

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Address City State Zip

\$ \_\_\_\_\_ or \_\_\_\_\_ % of Certificate to above named beneficiary.

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Name Relationship Social Security or Tax I.D. Number

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Address City State Zip

\$ \_\_\_\_\_ or \_\_\_\_\_ % of Certificate to above named beneficiary.

**ACKNOWLEDGEMENT** (Signatures required)

Each person signing below acknowledges and agrees that in the event of their death, United Pentecostal Church Development Fund, Inc. d/b/a United Pentecostal Church Loan Fund is authorized to pay principal and accrued interest earned on the Certificate to the beneficiary or beneficiaries named above..

**X**  
\_\_\_\_\_  
Signature Date

**X**  
\_\_\_\_\_  
Signature Date