

# Fund Information Change

FORM PAGE 1/3



## Instructions

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Please use this form to submit changes to your fund. If you need assistance, call 913-310-0279.

### Return completed forms to:

**Mail or Overnight Delivery:**

The Signatry  
7171 W. 95th Street, Suite 501  
Overland Park, KS 66212

**Fax:**

913-227-0254

**Email:**

donorcare@thesignatry.com

## Fund Information

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Fund Name

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Fund ID

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## Changing Fund Name

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New Fund Name

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## Adding or Removing an Authorized Person on the Fund

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I would like to:

**Add** (allow access to fund information, including current and historical data and transactions regarding the fund)

**Remove** (terminate all access and rights to fund)

Full Name

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Date of Birth

---

*Individuals must be at least 18 years of age*

Company (if applicable)

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Address

Street

City

State

ZIP

Primary Phone

Home

Cell

Business

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Email Address

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## Role Access

**Full Access**—Complete access to the fund

**Read Only + Investments**—View only access plus updating investment settings

**Read Only + Grants**—View only access plus recommending grants

**Read Only**—View only access without the ability to recommend grants or changes to the fund

# Fund Information Change

FORM PAGE 2/3



Fund Name

Fund ID

## Additional Person

I would like to:

**Add** (provide advisory rights to fund information including current and historical data and transactions regarding the fund)

**Remove** (terminate all access and rights to fund)

Full Name

Date of Birth

*Individuals must be at least 18 years of age*

Company (if applicable)

Address

*Street*

*City*

*State*

*ZIP*

Primary Phone

Home

Cell

Business

Email Address

## Role Access

**Full Access**—Complete access to the fund

**Read Only + Investments**—View only access plus updating investment settings

**Read Only + Grants**—View only access plus recommending grants

**Read Only**—View only access without the ability to recommend grants or changes to the fund

# Fund Information Change

FORM PAGE 3/3



Fund Name \_\_\_\_\_

Fund ID \_\_\_\_\_

## Recommend Investment Pool Changes

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Your fund with The Signatry can be invested in The Signatry's biblically responsible investment pools, or you can recommend a financial advisor to manage the fund's investments. Learn more about the investment pools at [www.thesignatry.com/investments](http://www.thesignatry.com/investments). Funds will be invested in the money market if no options are selected.

If you choose to have the fund invested with The Signatry's biblically responsible investment pools, please indicate below what percentage of your fund you would like invested in each pool:

### Investment Pools

_____ %	<b>Money Market</b> —100% fixed income holdings
_____ %	<b>Capital Preservation Model</b> —5% equity holdings
_____ %	<b>Conservative Income</b> —25% equity holdings
_____ %	<b>Income &amp; Growth Model</b> —50% equity holdings
_____ %	<b>Growth Model</b> —70% equity holdings
_____ %	<b>Aggressive Growth Model</b> —95% equity holdings
_____ %	<b>Domestic Index Pool</b> —95% equity holdings
<b>100%</b>	<b>Total</b>

When deposits and withdrawals are processed from this fund, the money will be invested or liquidated according to these instructions. For more advanced configurations, please navigate to the online fund settings or contact our team.

## Recommend Investment Pool Changes

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By signing below: (1) I, the undersigned donor or authorized signer, understand that all gifts to this fund are irrevocable and nonrefundable gifts to The Signatry for charitable purposes; (2) I acknowledge that I have read and agree to this Form and The Signatry User Agreement (which includes details regarding the terms used in this Application, the parties' roles and responsibilities, limitations of liability, an arbitration clause (including a class action waiver), indemnification of The Signatry, and other terms and conditions) which are available on The Signatry's website (at [thesignatry.com/agreement](http://thesignatry.com/agreement)) or upon request; (3) I certify that, to the best of my knowledge, all information I have provided is accurate and I will notify The Signatry promptly of any changes; and (4) I also understand that my capacity as a Donor is advisory in nature and that The Signatry has the sole and exclusive authority and discretion to invest and disburse the property transferred.

Donor or Authorized Signer \_\_\_\_\_

Printed Name \_\_\_\_\_

Date \_\_\_\_\_

Donor or Authorized Signer \_\_\_\_\_

Printed Name \_\_\_\_\_

Date \_\_\_\_\_