HERITAGE INVESTMENT SERVICES FUND, INC
4651 Westport Drive, MECHANICSBURG, PA 17055-9225 (717)796-9784

ACCOUNT CHANGE FORM

NOTE NUMBER(S) AFFECTED BY THIS CHANGE:

REQUESTED CHANGES

☐ Primary Account holder change of name/ address **(Complete Sections A & D)**

☐ Transfer Funds from a Demand Note to Term Note **(Complete sections B & D)**

☐ Add/Change/Remove Joint Tenant with Right of Survivorship (**Complete Sections C & D)**

**** If you have more than one change and it does not apply to all notes listed above, please complete a separate account change form for each note affected.***

SECTION A - PRIMARY ACCOUNT HOLDER CHANGE OF NAME/ADDRESS

Individual:_____ _____- _____- _____
First M Last Social Security #

Address:_____
Street Address or Box Number

_____ (_____) _____-_____
City Sate Zip

Phone

Email Address: _____

SECTION B - TRANSFER FUNDS FROM A DEMAND NOTE TO A TERM NOTE

I/We desire that funds be transferred from Demand Note # _____ into a note with the terms indicated on the enclosed purchase application.

****Attach Note Purchase Application*

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SECTION C - ADD/ CHANGE/ REMOVE JOINT TENANT WITH RIGHT OF SURVIVORSHIP (JTROS)

☐ Add a new JTROS ☐ Replace current JTROS ☐ Remove a JTROS

New Joint Tenant Information

Individual:_____ _____- _____- _____
First M Last Social Security #

Address:_____
Street Address or Box Number

_____ (_____) _____-_____
City Sate Zip Phone

Previous Joint Tenant Information (if removing or replacing a JTROS)

***If you are removing or replacing a Joint Tenant due to death, please attach an original death certificate.*

Individual:_____ _____- _____- _____
First M Last Social Security #

Address:_____
Street Address or Box Number

_____ (_____) _____-_____
City Sate Zip Phone

SECTION D - SIGNATURE(S)

The undersigned hereby agrees to all changes made to the account in accordance with this Account Change Form and the provisions of the Prospectus dated April 24, 2011 receipt of which is hereby acknowledged. The undersigned represents that the undersigned is a member of, contributor to or participant in the General Council of the Assemblies of God, the Pennsylvania-Delaware District Council of the Assemblies of God, or in a program, activity, or organization which constitutes a part of the of the General Council or the District Council, or in a church organization that has a programmatic relationship with the General Council or the District Council, or a custodian or trustee for a health savings account for such a person.

Primary Account Holder Signature: _____ Date: _____

New/Current Joint Tenant Signature: _____ Date: _____

Previous Joint Tenant Signature (If applicable) _____ Date: _____