



UNITED METHODIST
STEWARDSHIP FOUNDATION
OF GREATER NEW JERSEY

Foundation Withdrawal Request Form

Account Name at Wespeth: _____

Wespeth Account Number: _____

Withdrawal Amount: _____

ACH Instructions:

Bank Name: _____

Bank Address: _____

Church's Name on bank account: _____

Bank's Routing Number: _____

Church's Bank Account Number: _____

Approvals:

Print: _____

Print: _____

Signature: _____

Signature: _____

Position: _____

Position: _____

Date: _____

Date: _____

*Each withdrawal request must be signed by the pastor and the Treasurer or Finance Chair. They must be listed on the Authorized Signors Form for the withdrawal to take place.

UMF fills in:

Balance: _____

Close of business date: _____

Fund: _____