



3 KACEY COURT, SUITE 101
MECHANICSBURG, PA 17055
E-MAIL: invest@hisfund.com
TOLL FREE: (866) 219-0820
PHONE: (717) 796-9784
FAX: (717)795-9568
www.hisfund.com

PERSONAL INTEREST OPTION CHANGE FORM

SECTION A – INTEREST OPTION (Please check either “Compound Interest” or “Pay Interest” below and, if you choose “Pay Interest,” please check one of the interest payment options. If you do not elect any of the options, all interest will be automatically redeposited. Interest is compounded on a quarterly basis only if interest is left on deposit. Interest rate on all Demand Notes is variable. Interest on Term Notes is fixed at time of issuance. See “Description of Securities” in the Prospectus.)

Name _____

Note Number(s) Affected By This Change _____

- | | | |
|---|------------------|--|
| <input type="checkbox"/> Compound Interest (redeposit)
Quarterly (every three months)† | <u>OR</u> | <input type="checkbox"/> Pay Interest (please choose payment frequency by checking one of the options below) †* |
| | | <input type="checkbox"/> Monthly
<input type="checkbox"/> Quarterly (every three months)
<input type="checkbox"/> Semi-Annually (every six months)
<input type="checkbox"/> Annually (every twelve months) (not available with 2 ½ Year Note) |

† Interest payment or compounding period is currently based on the number of months specified above (1, 3, 6 or 12 months, as applicable) from the end of the month of purchase with the first interest payment or redeposit occurring as of the end of the month of purchase. Heritage Investment Services Fund, Inc. (HIS Fund) reserves the right to adjust this method in its discretion.

* Interest will be paid via Direct Deposit. Please complete the Direct Deposit Form available on our website.

SECTION B – SIGNATURES

The undersigned hereby applies to purchase a Note in accordance with this Application and the provisions of the Prospectus dated April 24, 2017 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 General Council or the District Council, or in a church organization that has a programmatic relationship with the General Council or the District Council.

_____ Signature	_____ Date
---------------------------	----------------------