

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 NOTE PURCHASE APPLICATION

Please complete and sign this application to open a new investment for non-IRA accounts.

Type of Account (Choose one):

□ Individual (one account name only)

□ Joint Tenants with Right of Survivorship* □ UTMA Custodial Account for Minor**

Primary Account Owner or Minor Information if UTMA Account				Joint Owner or UTMA Custodian Information (if applicable)				
First Name	MI	Last Name		First Name	MI	Last Name		
Social Security Number		Date of Birth (mm/dd/yyyy)		Social Security Number		Date of Birth (mm/dd/yyyy)		
Mailing Address			Mailing Address					
City		State	Zip	City			State	Zip
Email				Email				
Phone				Phone				
□ If you hold ministerial credentials with the Assemblies of God, please check here. □ This is my new address, please update your records accordingly.		Relationship of Joint Acco Owner/UTMA Custodian t Account Holder/Minor:	an to Primary ministerial credentials with the			redentials with the		

*For joint accounts: The primary account owner's name and social security number listed will be used for tax reporting purposes. HIS Fund limits joint accounts to the primary account owner and one additional joint owner. Both joint account owners must sign this Application below. However, in the discretion of HIS Fund, only the signature of one of the account owners may be required for transactions with respect to a joint account, including withdrawals, renewals and reinvestment. HIS Fund may act at any time on the instructions of either account owner and withdrawal checks may be made payable to either named account owner. Account statements and other correspondence will be sent only to the address of the primary account owner. Please consult with your tax advisor regarding possible tax implications of joint accounts.

**For UTMA accounts: The UTMA custodian must sign this Application below. The minor's name, address and social security number will be used for tax reporting purposes. All other account statements and correspondence will be sent to the custodian. Please consult with your tax advisor regarding possible tax implications of UTMA accounts. By signing below, the custodian understands and acknowledges that custodian's rights and duties are governed by the Pennsylvania Uniform Transfer to Minors Act.

Electronic Delivery Agreement: (*Check the box to go paperless*). In lieu of receiving a mailed copy of HIS Fund's Prospectus, Financial Statements and all other HIS Fund documents (i.e. periodic investment statements, deposit receipts and confirmation of purchase issuance letters). I request HIS Fund to send me, via email, notification that the Prospectus and Financial Statements are available for review through or on HIS Fund's website. I understand I may revoke this request at any time or change the delivery address by contacting HIS Fund.

Amount	of	Purchase:	\$

_____(\$500 minimum) (DO NOT SEND CASH)

Please find the enclosed check, made payable to HIS Fund (A)	<i>Heritage Investment Services Fund, Inc.)</i>
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D Please debit the bank account from my existing ______ (bank name) bank account on file ending in _____ (last three digits)

Delease debit my new _____ (bank name) bank account ending in _____ (last three digits) (Attach a Direct Deposit Authorization Form)

Investment Instruction: (E	Inter the dollar amount for each	type of Note in which you want to invest.)	Demand Notes are not avai	lable in South Carolina.
Demand Note	\$	6 Month Note	\$	
1 Year Note	\$	2 ½ Year Note	\$	
4 Year Note	\$	5 Year Note	\$	

INVESTOR HAS NO RIGHT OF WITHDRAWAL PRIOR TO MATURITY. If HIS Fund, in its discretion, permits early withdrawal, interest penalty and processing fee may apply. Restrictions on transfer apply. See "DESCRIPTION OF SECURITIES – Restrictions on Withdrawal and Transfer; Penalty and Fee on Voluntary Redemption" in the Prospectus.

Interest Options: (Please check either "Compound Interest" or the "Pay Interest" section below. If "Pay Interest" is selected, payment will be made only by ACH (electronic funds transfer). If no ACH information is on file or if no option is selected below, interest will compound.				
$\Box \text{ Compound Interest (redeposit } \underline{OR}$	Pay Interest:			
quarterly)				
	□ Monthly □ Quarterly □ Semi-Annually □ Annually			
	□ Use existing ACH instructions on file			
	□ Establish new ACH by completing a Direct Deposit Form			

The undersigned hereby applies to purchase a Note in accordance with this Application and the provisions of the current Prospectus, 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.

Primary Account Owner/UTMA Custodian Signature	Date
Joint Account Owner (if applicable)	Date
How did you hear about us? <i>Check any that apply</i> :	

How did you hear about us? *Check any that apply*: District Council Conference Pastor From a friend Other:

Acceptance of this Application by HIS Fund will be evidenced by a written confirmation. HIS Fund reserves the right to reject any application for any reason in its discretion.

IF YOU HAVE ACCEPTED AN OFFER TO PURCHASE THESE SECURITIES DESCRIBED IN A PROSPECTUS WHICH CONTAINS A NOTICE EXPLAINING YOUR RIGHT TO WITHDRAW YOUR ACCEPTANCE PURSUANT TO SECTION 207(m)(1) OF THE PENNSYLVANIA SECURITIES ACT OF 1972 (70 P.S. §1-207(m)), YOU MAY ELECT, WITHIN TWO BUSINESS DAYS AFTER THE FIRST TIME YOU HAVE RECEIVED THIS NOTICE AND A PROSPECTUS (WHICH IS NOT MATERIALLY DIFFERENT FROM THE FINAL PROSPECTUS), TO WITHDRAW FROM YOUR PURCHASE AND RECEIVE A FULL REFUND OF ALL MONIES PAID BY YOU. YOUR WITHDRAWAL WILL BE WITHOUT ANY FURTHER LIABILITY TO ANY PERSON. TO ACCOMPLISH THIS WITHDRAWAL, YOU NEED ONLY SEND A WRITTEN NOTICE (INCLUDING A NOTICE BY FACSIMILE OR ELECTRONIC MAIL) TO THE ISSUER (OR UNDERWRITER IF ONE IS LISTED ON THE FRONT PAGE OF THE PROSPECTUS) INDICATING YOUR INTENTION TO WITHDRAW.