



HERITAGE INVESTMENT SERVICES FUND
Investing for a Higher Purpose
Matthew 16:18

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 MECHANICSBURG, PA 17055
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 PHONE: (717) 796-9784
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 www.hisfund.com

WITHDRAWAL REQUEST

(To fully or partially withdraw from a note)

Investor Name: _____

Phone Number: _____

Email: _____

If primary or joint account owner holds ministerial credentials check here.

Check one:

Withdrawal Amount: \$ _____

Close investment and withdraw total balance.

Please verify the last 4 digits of FEIN or SSN:

Investment Number(s): _____

Please send the funds via: (Check one)

ACH (Direct Deposit) I hereby authorize Heritage Investment Services Fund, Inc. (HIS Fund) to process any specific request for direct deposit to:

My existing _____ (bank name) bank account on file ending in _____ (last three digits).

My new _____ (bank name) bank account ending in _____ (last three digits) (Attach a Direct Deposit Authorization Form).

Check

Comments:

The undersigned hereby acknowledges and understands that HIS Fund may impose a request processing fee not to exceed \$15.00 and an interest penalty of up to three month's interest (if this request is for a withdrawal from a Jumbo 5 Year Note before its maturity date) or one month's interest (if this request is for a withdrawal from any other Term Note before its maturity date).

If this withdrawal is done on a Demand Note there will be no penalty if withdrawal is completed after the expiration of 30 days' prior notice to HIS Fund.

<i>Print Name</i>	<i>Signature</i>	<i>Date</i>
<i>Print Name</i>	<i>Signature</i>	<i>Date</i>

(Churches/Organization are required to provide TWO Authorized Signatures unless otherwise specified on your Church/Organization Resolution.)