

CERTIFICATE OF EXISTENCE OF TRUST and AUTHORITY TO ACT



CHURCH EXTENSION FUND, INC. (CEF)
Central Illinois District - LCMS (CID)
TELEPHONE: (217) 793-1802 FAX: (217) 793-9454
EMAIL: cef@cidlcms.org www.cid-cef.org

This Trust Certification is to be used ONLY if investments are to be registered in the name of a Trust and is given to the Central Illinois District Church Extension Fund, Inc. (CID-CEF) with respect to all investments established for the following Trust:

Name of Trust: _____

Date of Trust: _____ Date of Last Amendment (indicate if none): _____

Trust is: Irrevocable - Provide TIN # of Trust: _____

Revocable - Provide Grantor SS# or Trust TIN #: _____ (used for reporting interest to IRS)

Name(s) of Grantor(s): _____

Trustee Information and Certifications:

If there is more than one Trustee, the Trustees (must check one):

- May act separately
- Must act jointly

The undersigned Trustee(s) and, if the Trust is revocable, the above-referenced Grantor(s) if available, hereby certify(ies) to the CID-CEF, and agree(s), that:

- The information on this form is correct.
- The undersigned Trustee(s) is (are) all of the duly authorized and acting Trustee(s) of this Trust.
- The undersigned Trustee(s) has (have) power under the Trust and the applicable law to enter into transactions and issue instructions to the CID-CEF concerning the Trust.
- Any and all transactions effected and instructions given will be in full compliance with the Trust.
- CID-CEF will be informed in writing of any changes in the composition of the Trustees, or any other event which could alter these certifications.
- The undersigned Trustee(s) and the Trust shall, jointly and severally, indemnify and hold harmless CID-CEF and its directors, officers, and employees from any claims, liability, loss, cost, or expense (including attorney's fees) arising from reliance by CID-CEF on this certification or from CID-CEF effecting transactions pursuant to the instructions given by any of the then acting Trustee(s) so identified on this form.
- CID-CEF has not been provided with a copy of the Trust instrument, and further, the Trustee(s) agree(s) that CID-CEF will have no responsibility to examine the Trust document or to ensure the proper application of the Trust assets in accordance with the Trust instrument.
- If this Trust is revocable, the person holding power to revoke is _____.
- If this Trust is amendable, the person holding the power to amend is _____.

Under penalties of perjury, I certify that:

1. The Social Security or Tax Identification Number shown is correct.
2. I am either exempt from withholding or otherwise not subject to backup withholding. The IRS has not notified me that part of my dividend and interest is to be withheld as a result of my failure to report all dividend and interest income. (Please draw an "X" through this paragraph and initial if you ARE subject to backup withholding.)
3. I am a U.S. person (including a U.S. resident alien).

Note: Due to Internal Revenue Service regulations, CID-CEF cannot record your investment until your Taxpayer Identification Number is provided. The IRS does not require your consent to any provisions of this application other than the certifications required to avoid backup withholding.

Signatures (additional Trustee information to be provided on page 2):

Grantor (Revocable Trust) Date

Grantor (Revocable Trust) Date

Trustee Date

Trustee Date

Trustee Date

Trustee Date

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Name of Trust: _____

Current Trustee(s):

Name _____	Address _____ _____ _____
Name _____	Address _____ _____ _____
Name _____	Address _____ _____ _____
Name _____	Address _____ _____ _____

Successor Trustee(s):

Name _____	Address _____ _____ _____
Name _____	Address _____ _____ _____

CHURCH EXTENSION FUND, INC. (CEF)
Central Illinois District - LCMS (CID)

1850 North Grand Avenue West
Springfield, IL 62702-1626

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