



1 INVESTOR OWNERSHIP CHOOSE EITHER A. SOLE/JOINT OR B. TRUST

Must be at least 18 years old. One or more owners with full rights of survivorship and not tenants in common. Interest is reported to the IRS using the Social Security number of the first owner listed.

A. SOLE

Name	Date of Birth	
Street	City/State	ZIP Code
Social Security Number	Home Phone	Mobile Phone
Email		

JOINT

Name	Date of Birth	
Street	City/State	ZIP Code
Social Security Number	Home Phone	Mobile Phone
Email		

B. TRUST

Must send LCEF Trust Certification form, available at lcef.org or by calling 800-843-5233.

Name of Trust	Social Security Number/TIN
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2 LCMS CHURCH WORKER STATUS Let us know your LCMS church worker status by checking the appropriate option from each of the sections below.

A.	<input type="checkbox"/> Ordained	B.	<input type="checkbox"/> Pastor	<input type="checkbox"/> LCMS Organization Staff	<input type="checkbox"/> Deaconess
	<input type="checkbox"/> Commissioned		<input type="checkbox"/> Teacher	<input type="checkbox"/> Church/School Staff	<input type="checkbox"/> Other: _____
	<input type="checkbox"/> Lay worker		<input type="checkbox"/> DCE	<input type="checkbox"/> Retired	

3 CHURCH WORKER STEWARDACCOUNT® Minimum \$100.

Opening Amount:	Issue a Visa® Debit Card for:
\$ _____	<input type="checkbox"/> Owner 1
	<input type="checkbox"/> Owner 2

4 MEMBER CONGREGATION

Your Member Congregation
City/State

5 ELECTRONIC INVESTMENT

I authorize LCEF to initiate withdrawals from the checking account described below for credit to our new LCEF investment in the amount of:

\$ _____	Financial Institution	Account Number
Month Frequency:	Please attach a voided check.	
<input type="checkbox"/> 1 st & 15 th		
<input type="checkbox"/> once a month (indicate date): _____		

6 SIGNATURE All owners must sign. By signing this application, you agree to the certification statements listed in Investment Certification on the back.

Signature of Primary Owner or Trustee	Date	Mother's Maiden Name
Signature of Joint Owner or Trustee	Date	Mother's Maiden Name

***IMPORTANT:**
Please read and select one of the Offering Circular options on the back of this application.

***Please read and check the appropriate box.**

LCEF is a nonprofit religious organization; therefore, LCEF investments are not FDIC-insured bank deposit accounts. This is not an offer to sell investments, nor a solicitation to buy. LCEF will offer and sell its securities only in states where authorized. The offer is made solely by LCEF's Offering Circular. Investors should carefully read the Offering Circular, which more fully describes associated risks. StewardAccount access features are offered through UMB Bank n.a. StewardAccount products are not available to investors in South Carolina.

- ☐ I have received or reviewed the current Offering Circular.
- ☐ I agree to promptly visit lcef.org and review the Offering Circular.
- ☐ Please mail me a copy of the Offering Circular.

If the third box is checked or no box is checked, an Offering Circular will be mailed to your address. Also, if the second or third box is checked or no box is checked, your investment will not be completed until five business days after we receive your application.

**Complete the application and mail it with your check to LCEF at:
PO Box 229009, St. Louis, Missouri 63122-9009.**

Additional StewardAccount Provisions:

- I agree to the terms and conditions of the Check-Writing Agreement, and if selected, the Visa Debit Card Agreement. Both agreements are available at lcef.org/agreements.
- In authorizing either owner to sign redemption checks, I authorize LCEF to accept any order of redemption from any StewardAccount owner.

Investment Certification: "I" and "my" refer to all applicants, whether one or more. I am of legal age and have received a current Offering Circular of the Lutheran Church Extension Fund—Missouri Synod. Prior to receipt of the Offering Circular, I was a member of, contributor to, or participant in The Lutheran Church—Missouri Synod or any district or other program, activity, or organization that constitutes a part of the Synod or any of its districts, or I was an ancestor, descendant, or successor in interest to such person.

For Pennsylvania residents only: By signing this application, I agree that I was advised of the right of withdrawal described in the Offering Circular.

Under penalties of perjury, I certify:

1. The Social Security number or Tax ID Number shown on this application 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 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, LCEF cannot record your investment until your Taxpayer Identification Number is provided and the certification signed. The IRS does not require your consent to any provisions of this application other than the certifications required to avoid backup withholding.

ABOUT BENEFICIARIES

Ensure your assets are given to the person or ministry of your choice. To designate beneficiaries, you must complete a Beneficiary Designation Form found at lcef.org.



Lutheran Church Extension Fund
› where investments build ministry

PO Box 229009, St. Louis, MO 63122-9009 | 800-843-5233 | fax: 314-996-1131 | lcef.org