



MEMO REGARDING  
Investment Account Signature Authorization Update

**Account Name(s) and Fund Numbers:** \_\_\_\_\_

\_\_\_\_\_

Signature	Printed Name	Date

\_\_\_\_\_  
Signature of an authorized official of the organization

\_\_\_\_\_  
Title

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Phone

Church/Institution Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**Dakotas Methodist Foundation**  
PO Box 460  
Mitchell, SD 57301  
605-990-7790  
info@dakotasumf.org

Please remove the following individuals:
