Allocation Update Form

To Update Exisiting Account Allocations

Questions or Need Assistance?

Call (909) 738-4000 or email info@bfcal.org

THE BAPTIST Foundation OF CALIFORNIA™

1. Account Information

___ ___ ___ ___ ___ _____

Account number Name of Account

2. Allocation Update

Mid Term Income Fund	$_____	or	_____%
Long Term Income Fund	$_____	or	_____%
Global Equities Fund	$_____	or	_____%
Primary Alternatives Fund	$_____	or	_____%
Total	$_____	or	100%

3. Disclosure & Signatures

By signing below, signer(s) acknowledge that they are the legally authorized signers for this account, that they have authorization to initiate an allocation change, and that they understand the risks associated with their investments as well as the fees associated with the allocation selected.

Signature	Signature
Name of Authorized Signer (please print)	Name of Authorized Signer (please print)
Date	Date
Signature	Signature
Name of Authorized Signer (please print)	Name of Authorized Signer (please print)
Date	Date

Deliver Form to:

Email: info@bfcal.org (preferred)

Mail: The Baptist Foundation of California
3210 E. Guasti Road, Ste 640
Ontario, CA 91761