

# Tennessee Baptist Foundation

## Fund Withdrawal Request Form

Name of Fund: \_\_\_\_\_

Church or Organization: \_\_\_\_\_

Amount of Withdrawal Requested: \_\_\_\_\_

Funds needed by what date? \_\_\_\_\_

Special instructions: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Authorized Signatures (two required):

\_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

\_\_\_\_\_ Date: \_\_\_\_\_ Phone: \_\_\_\_\_

**Send request by Fax, email or regular mail:**

Fax – 615.371.2049

Email – [tgarrett@tnbaptist.org](mailto:tgarrett@tnbaptist.org)

Mail to:

Tennessee Baptist Foundation

Attn: Mrs. Teresa Garrett

P. O. Box 682789

Franklin, TN 37068

Note: As stated in your Fund Management Agreement it may take as much as thirty (30) days from the day your request arrives in the Foundation's office to liquidate your funds and return them to you. Thank you for your continuing confidence in the Tennessee Baptist Foundation.