

DEMAND NOTE
SOUTHERN UNION REVOLVING FUND

DESIGNATION OF BENEFICIARY CHANGE

**FLORIDA CONFERENCE ASSOCIATION OF SEVENTH-DAY ADVENTISTS
DEVELOPMENT & PLANNED GIVING**

351 S. State Road 434 Altamonte Springs, FL 32714-3824
(407) 644-5000 tel x 2242 or 2245 / 407-644-7550 fax

Southern Union Revolving Fund

Attn: Mariel Lombardi PO Box 923868 Norcross, GA 30010-3868
Questions call: (770)408-1800 x122 – Mariel Lombardi SURF Fax: 770-408-1803

DATE _____

I/We currently have funds invested in the following Demand Note with the Southern Union Revolving

Fund: Account Name: _____

Account Number: _____

I/We would like to change the beneficiary(ies) of this account to:

Beneficiary	Percentage
_____	_____
_____	_____
_____	_____
_____	_____

Signature

Print Name

Signature

Print Name

PLEASE SIGN ABOVE AND RETURN IN THE ENCLOSED STAMPED/ADDRESSED ENVELOPE.

OFFICE USE ONLY

PG&TS Representative: _____ **DATE:** _____

APPROVED BY: _____ **DATE:** _____