

**BAPTIST MISSIONARY ASSOCIATION OF MISSISSIPPI
 REVOLVING LOAN FUND DEPARTMENT
PROMISSORY NOTE – CHURCH/ORGANIZATION ACCOUNT FORM**

Date: _____, 20__ Amount: \$ _____ Current Interest Rate: _____ %

Account # _____ Interest: Add to Principle Mail Quarterly Mail Annually

CHURCH / ORGANIZATION:

Name: _____ FED ID#: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____ Fax: _____ E-Mail: _____

AUTHORIZED TO ACCESS ACCOUNT: Treasure &/or Designated Officer(s)

Treasurer: _____ Signature: _____ SS #: _____
 Address: _____ City: _____ State: _____ Zip: _____
 Phone: _____ Cell: _____ E-Mail: _____
 optional
 Name/Title: _____ Signature: _____ SS #: _____
 Name/Title: _____ Signature: _____ SS #: _____
 Name/Title: _____ Signature: _____ SS #: _____

For value received for loan/deposit minus all withdrawals and accrued interest paid, the BMA of MS RLF Department Trustees promise to pay to the above Investor(s) upon request any portion or total of the Investor's current balance provided that current liquidity is available. If unusual conditions should restrict liquidity, share funds will be available on a weighted share average. All investments will earn interest compounded quarterly thereon at the rate determined by the trustee board. Should the rate of interest be adjusted by means of increase or decrease, each Investor will receive notice of such at least fifteen days before the new rates take effect.

For Protection of Investor's Account: In case of death of Investor(s), the BMA of MS RLF Department Trustees will release any portion or all of the total remaining balance of said account to Beneficiary(ies) named on this account document after receiving instructions from legal representatives of both the Investor(s) and the RLF Department with the above stated liquidity restriction.

The conditions herein set forth shall be binding upon the beneficiary, heirs, successors, legal representatives, executors and administrators of the Investor(s).

Witness our signatures on this the _____ day of _____, 20 __. Approved as to form and content:

_____ (Church or Organization Name) _____ (Pastor / Moderator Signature)

****NOTARY****

State of ___ / County of _____

On this ___ day of _____, 20 __ before _____ (the undersigned officer),
 _____,
 and _____ personally appeared and declares that he/she is the Treasurer or Designated Officer of said church/organization, known to me or satisfactorily proven to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged that he/she/they, being authorized to do so, executed the same for the purposes therein contained. In witness whereof, I here unto set my hand and official seal.

 Notary Signature

Reviewed by: _____ Approved by: _____
 Brittany Cummins
 Baptist Missionary Association of MS
 Missions & RLF Department Office Manager