

Online Giving Fund Application

Refer to the Online Giving Program Guide for details regarding your fund with the Presbyterian Foundation. The following information will assist in establishing your fund.

1, ORGANIZATION INFORMATION ______ Federal Tax ID ______ Organization Name ____ Address _ ______ State ______ Zip _____ ____ Fax ___ Phone ___ Web Address ____ Email _ (For general organizational correspondence) Our Organization is Presbyterian ☐ Presbyterian-Related Example: Camp or Conference Center (Provide completed Presbyterian Relatedness Form) Organization Mission Statement: 2. BANK INFORMATION A voided check must be included for this account to be verified. The account for which a check is provided will be where the funds are deposited upon monthly disbursement. ■ Voided check included Routing Number _____ Account Number _____ 3. ONLINE GIVING FUND INFORMATION Write the fund name and purpose as you wish it to be displayed online. The name is unique to your ministry. You may establish multiple funds to address various projects. If necessary, list additional funds on another sheet. Please note if you wish to establish a fund for non-charitable payments. Fund Name -(ex. General Fund) Restrictions? ☐ Yes □ No If yes, what restrictions? ____ Will contributions to this fund be eligible for a tax deduction? Yes ■ No Fund Name ___ Restrictions? ☐ Yes ■ No If yes, what restrictions? Will contributions to this fund be eligible for a tax deduction? Yes ■ No

■ No

Would you like to recieve a complimentary set of pew cards? ☐ Yes

4. FUND ADMINISTRATORS

Assign responsibility to the appropriate individuals for the fund management activities listed below. Include additional administrators on another sheet.

- Access donor and gift information
- · Access fund summary information (including fund balances and withdrawal history)
- · Make withdrawal requests
- Request administrative changes to funds
- Add/Remove other administrators
- Note: All fund access is online.

Administrator Name (print)	Position
Email (required)	Phone
Is this individual an employee of the organization? ☐Yes ☐No	
Administrator Name (print)	Position
Different Email than above (required)	Phone
Is this individual an employee of the organization? \square Yes \square No	
Administrator Name (print)	
Different Email than above (required)	Phone
Is this individual an employee of the organization? \square Yes \square No	
5. AUTHORIZATION	
I certify that each of the people listed above is authorized to access the inform Section checked above. I further certify that we have read and agree to the Or set forth in the Online Giving Program Guide.	
Authorized Signer Name (print)	Position
Email (required)	Phone
Are you an employee of the organization? ☐Yes ☐No	
Grant the authorizer fund access?	r □No
Authorized Signature	Date
Please submit:	mentation of Presbuterian relatedness

Note: Fund Administrators and Authorized Signer will receive a welcome email with information regarding fund administration upon the establishment of your funds.

For quickest set up, fill this out electronically and email: onlineservices@presbyterianfoundation.org



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