

Church Growth Investment Fund

1320 Hendricks Avenue
Jacksonville, FL 32207
(904) 345-3225 / (904) 346-0414 Fax

INVESTMENT AUTHORIZATION FOR PURCHASE

Please complete and sign this application and return it, with your check made payable to the GoldStar Trust, to the above address.

Account Information:

FULL LEGAL NAME: _____

SOCIAL SECURITY NUMBER: _____

Address: _____

City: _____ State: _____ Zip: _____

Home Phone: _____ Business Phone: _____

INVESTMENT OPTIONS:

IRA Type _____ Traditional _____ Roth ESA _____

Amount of Transfer/Rollover to Purchase: \$ _____

Contribution Amount \$ _____ Contribution Year _____

Account Number: _____

GOLDSTAR TRUST COMPANY INFORMATION:

I understand and agree that in directing you to complete this transaction, the Custodian, GoldStar Trust Company, assumes or incurs no liability as to the authenticity of the asset purchased, the appropriateness or worthiness of the investment, or otherwise. The Custodian's only responsibility is to determine if what is purchased agrees with the direction of this investment authorization and my agent's confirmation (if any). I have made my own investigation of the risks involved in making this investment and I understand those risks. I do hereby indemnify and hold forever harmless GoldStar Trust Company, its officers, employees, directors, successors, and assignees of and from any claim which may arise or result from purchase of the investment authorized hereby.

Release of IRA Account Information;

1. **Authorization:** GoldStar Trust Company (Custodian) is hereby authorized to release account balance information to representative of Church Growth Investment Fund, Inc. (Dealer). I understand that this allows the representatives or successors of the Dealer who sold me the investment in my IRA or SEP to know the status of my account. Upon signing of this release, the custodian may release my account information to the Dealer's representative on his request.
2. **Release of Liability:** I hereby release and agree to hold harmless GoldStar Trust Company from all liability arising out of the release of all IRA or SEP account information.

Signature: _____

Date: _____