

INDIVIDUAL INVESTMENT APPLICATION

Ownership Type: 🗌 In			Trust Name Trust EIN/SSN ase provide copy of tr			
1. Owner Information	(Applicant)					
Applicant Name:				am an o	rdained minist	ter 🗆 Yes 🗆
Address:						
City:	State:			Zip:		
Home Phone:	Wo	rk:		Cell:		
Email:				SSN#:		
Marital Status: 🗌 Sing	rital Status: 🗌 Single 🗌 Married 🗌 Widow			Birth Dat	e:	
2. Co-Owner Informa	t ion (If Applicable)					
Name:			Relations	ship:		
Address:						
City:	Sta	te:		Zip:		
Home Phone:	Wo	rk:		Cell:		
Email:				SSN#:		
Marital Status: 🛛 Sing	e 🗌 Married	🗆 Widow		Birth Dat	e:	
3. Church Affiliation						
Church Name:			City:			
4. Type of Investmen	t					
DEMAND INVESTMENTS		Non-IF	RA Tra	ditional IRA*	Roth IRA*	
READY ACCESS INVESTMENT - \$2,000 minimum						
TIME INVESTMENTS INVESTMENT TERM - \$ 3 yr 5 yr 10 Other Term (For Spe	yr	mos	□ s / vrs			
FLEXIBLE CERTIFICAT \$1,000,000 minimum		rm				
*IRAs require a minimum \$20,0 to open IRA accounts, and che "TMI Trust Company." Please co	cks for IRAs should b ontact CFR for furthe	e made payable	e to our IRA custodian,	Tota \$	l Investmer	nt Amount

5. Distribution of Interest (If non	e checked, defau	Ilt will be "Accum	ulate and compound in	my investment")
□ Accumulate and compound in m	y investment			
□ Pay to me by electronic funds tra	ansfer	□ Monthly	□ Quarterly	□ Annually
6. Electronic Funds Transfer				
 I desire to have Christian Financi in CFR's office for transfer to and savings statement, or letter of a the account named here with th Checking Savings 	d/or from my ba	ank or credit ur	nion account. Please a	attach a voided check,
7. Online Account Access				
□ I would like to be enrolled in onli □ I do not wish to have online acce				
8. Transfer on Death (individual, c	o-tenant, or last s	surviving joint te	nant only)	
\Box My estate \Box The following ind	dividual / institu	ution / trust:		
Name:			Birth Date:	
Relationship:	Socia	l Security or Ta	x I.D. Number:	
Address:	City:_		State:	Zip:
9. Acknowledgement and Auth	orization			

I, (we) hereby acknowledge receipt of the Offering Circular of Christian Financial Resources, Inc., and further represent that I (we) meet the definition of "Investor" as presented in the Offering Circular and accept the terms of the Offering Circular. Furthermore, each person signing below acknowledges that their signature(s), as signed below, will be used for identity verification purposes when requesting investment activities. By signing below, I (we) acknowledge that future Offering Circulars and other offering documents will be sent to me (us) over the Internet in machine-readable format and not by physical paper copy, and knowingly consent to receive those offering documents only electronically, at the email address provided above.

This application serves as a Substitute W-9 Form. Under penalties of perjury I (we) certify that: 1) The Social Security or Tax ID number shown on this form is correct; 2) I am (we are) either exempt from withholding or otherwise not subject to backup withholding, and the Internal Revenue Service (IRS) has not notified me (us) that part of my (our) dividend and interest income is to be withheld as a result of my (our) failure to report all dividend and interest income; and 3) I am (we are each) a US. person (including a US. resident alien).

Note: Please draw a line through Item 2 above if you ARE subject to backup withholding. The Internal Revenue Service does not require your consent to any provision of this form other than the certifications required to avoid backup withholding. For more information on backup withholding, visit www.IRS.gov.

To complete your Investment application sign here and either:

- Make a check for the amount of your investment payable to "CFR," or
- Complete the Electronic Funds Transfer information (Section 6), attach a voided check, and indicate the amount of investment in Section 4 (Type of Investment).

RIGHT TO WITHDRAW: PENNSYLVANIA RESIDENTS, YOU HAVE THE RIGHT TO WITHDRAW FROM YOUR PURCHASE OF THESE SECURITIES AS DESCRIBED UNDER "NOTICE OF RIGHT TO WITHDRAWAL" ON PAGE 3 OF THE OFFERING CIRCULAR.

□ I/WE AUTHORIZE TELEPHONE TRANSFERS ON MY/OUR ACCOUNT(S)**

DATE:	DATE:
PRINT NAME:	PRINT NAME:
SIGNATURE:	SIGNATURE:
MOTHER'S MAIDEN NAME:	MOTHER'S MAIDEN NAME:

This application serves as a Substitute W-9 Form. CFR is required to obtain your correct Social Security Number (SSN) in order to report to the Internal Revenue Service (IRS) interest paid to you. CFR, like any other payer of interest or dividends, must withhold 28% of interest paid to you if you fail to furnish CFR with the correct SSN or if you fail to sign the acknowledgement at the bottom of this Application. This is referred to as "backup withholding." For more information on backup withholding, visit www.IRS. gov. Please note that this is neither an offer to sell nor a solicitation of an offer to buy Christian Financial Resources securities. Such an offer is made by an Offering Circular and only in those states where Christian Financial Resources securities may lawfully be offered or sol. Christian Financial Resources securities are subject to certain risk factors as described in the Offering Circular and are not F.D.I.C. or S.I.P.C. insured nor are they bank deposits. NOTE: CFR has the right to call Certificates for redemption at any time upon sixty (60) days written notice. In such event, interest will be paid on the date of redemption. **Authorization for telephone transfers gives Christian Financial Resources, Inc. the rights to transact business with their investors where a written request may have been required. *IRA investments are excluded from telephone transfers.