			Church Loan Fund, Inc. Post Office Box 4608 Cleveland, TN 37320-4608 877-478-7190 423-478-7131	ţ	
	Loan Account Number		Regular Monthly Payment		
	Church Name		Add'l Principal	1	
	Church Contact Name		Late Fee	Ш	
	Email Address		Total	101	
I certi	fy that:				
	All church owned property is co	vered by insurance	ce and all premiums are paid AND premiums are paid (choose one):		
	☐ Monthly [Quarterly	Annually	\mathcal{Y}	
	I understand that should my insu	urance policy laps	se, the Church Loan Fund will provide coverage at the church's expense.		
	*Payments made more than 10 days after the due date will be charged a 2% late fee				
Church Loan Fund, Inc. Post Office Box 4608 Cleveland, TN 37320-4608 877-478-7190 423-478-7131					
	Loan Account Number		Regular Monthly Payment	Λ	
	Church Name		· · ·	1	
	Church Contact Name			Щ	
	Email Address			101	
I certi	fy that:				
		vered by insuran	ce and all premiums are paid AND premiums are paid (choose one):		
		Quarterly			
	-				
I understand that should my insurance policy lapse, the Church Loan Fund will provide coverage at the church's expense.					
*Payments made more than 10 days after the due date will be charged a 2% late fee					
			Church Loan Fund, Inc. Post Office Box 4608 Cleveland, TN 37320-4608 877-478-7190 423-478-7131	Ţ	
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		Quarterly	□ Annually	\times	
			se, the Church Loan Fund will provide coverage at the church's expense.		
*Payments made more than 10 days after the due date will be charged a 2% late fee					
"r uymenis maae more inan 10 aays ajier ine aae aaie wiii de chârgea â 2% late jee					