

FEBC Application for Gift Annuity

Annuitant #1

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Birth date ____/____/____ Social Security # ____ - ____ - ____

Annuitant #2 (Use only if this is a two-life annuity).

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Birth date ____/____/____ Social Security # ____ - ____ - ____

To fund my annuity: (Minimum annuity amount is ten thousand dollars—\$10,000).

Enclosed is my check/money-order, payable to Far East Broadcasting Company for \$_____

OR

I am transferring the following securities (stocks/bonds/mutual funds)_____

I would like to receive my check (mark one box):

quarterly annually monthly (if annuity is over \$50,000)

I understand that payments will be paid to me as long as I live or, if for two persons, as long as the survivor lives. In the event of my death (and the death of the survivor), payments will cease and the remainder will be released for use in the work of the Lord under the direction of FEBC.

Person to contact in an emergency if you cannot be reached:

Name _____ Phone _____

Address _____

City _____ State _____ Zip _____

Annuitant #1 _____ Date _____

Annuitant #2 _____ Date _____

Mail this form to
Far East Broadcasting Company
P.O. Box 1, La Mirada, CA 90637-0001