

AUTHORIZATION TO ALLOW DETERMINATION OF CREDIT WORTHINESS

I, _____ hereby authorize THE BOARD OF ORDAINED MINISTRY OF THE SOUTH CAROLINA ANNUAL CONFERENCE OF THE UNITED METHODIST CHURCH ("The Board") to investigate my credit worthiness and particularly in relation to extensions of credit as listed below. The undersigned application warrants that the following information is true, correct and complete, and that it may be relied upon by The Board in recommending me for a change in Conference relationship and/or by the Conference. I hereby authorize The Board to obtain from employees of any source such information as may be desired in connection with this application, and authorize such sources(s) to provide the same. A copy of this authorization shall be as valid as the original.

_____ Date

_____ (SIGNATURE OF APPLICANT)

Full Name & Address Of each Creditor or Account Opened	Date Credit/ Loan Granted	Purpose of Loan or Account	Current Balance	Monthly Payments	Payments Up to Date? YES / NO
1.					
2.					
3.					
4.					
5.					
6.					
7.					

IF ANY OF THESE ACCOUNTS ARE NOT CURRENT, LIST BELOW THE ACCOUNT AND THE AMOUNT PAST DUE? AND WHAT ARRANGEMENTS HAVE YOU MADE TO BRING THE ACCOUNTS UP TO DATE?
(Continue on back of form, if needed)