



1455 West Lake Street
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LODGE/DISTRICT DEPOSIT FUND APPLICATION

Lodge/District Name: _____ Number: _____

Address: _____

Deposit: _____ (\$5,000.00 Minimum, \$200,000.00 Maximum)

Account Name: _____
(Example: General Fund, Scholarship Fund, Building Fund, Etc.)

We understand that interest will be credited to our deposit. Interest rates can be changed monthly based on market conditions. The lodge/district understands that these funds are backed by the full faith and credit of Sons of Norway.

Under penalties of perjury, I certify that the Lodge/District Taxpayer ID No. (E.I.N.) is:

A statement will be sent to the lodge each calendar quarter.
Minimum withdrawal amount - \$1,000.00
Two free withdrawals per quarter, additional withdrawals are subject to \$25.00 fee.
Check will be made payable to the lodge/district and sent to the lodge/district.
The lodge/district number will be the deposit fund account number.

The lodge/district may request withdrawal of funds by submitting the Lodge/District Fund Withdrawal Request Form, bearing the signature of any two of the following officers:

SIGNATURE

SIGNATURE

SIGNATURE

TITLE

TITLE

TITLE

DATE

Please have this fund application signed by the officers who will be authorized to sign withdrawal forms.