AUTHORIZED SIGNATURE FORM

This form (the "Form") is provided to WELS Church Extension Fund, Inc. by the WELS congregation or WELS affiliated organization designated below ("Organization"). The undersigned hereby certifies that he or she is the duly authorized Secretary of the Organization and, as such, further certifies to the following:

The Organization's previously submitted Organization Investment Application is true and complete. Each of the following named individuals has authority to execute all documents and to make all decisions on behalf of the Organization in connection with the WELS Church Extension Fund, and the signature written opposite the name and title of each person is such person's genuine signature. The execution by any such person of any investment application, additional investment or partial redemption request or any other document, or the performance by such person of any act in connection with the foregoing matters, shall conclusively establish such person's authority therefor.

-	(Print Name)	(Title)	(Signature)
-	(Print Name)	(Title)	(Signature)
-	(Print Name)	(Title)	(Signature)
-	(Print Name)	(Title)	(Signature)
,—	(Print Name)	(Title)	(Signature)
executed 		ersigned on and as of	elow has caused this form to b/ and State)
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WELS Church Extension Fund, Inc. N16W23377 Stone Ridge Drive Waukesha WI 53188-1108 866.511.7793 † Fax: 262.522.2801