## Account Committee

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| **Fund Name:** |       | **Date:** |       |
| **Account Name:** |       |

[ ]  The Account Committee will be the same as the Fund Advisory Committee.

[ ]  Members of the Account Committee are listed below. At least two of the members are also members of the Fund Advisory Committee (FAC).

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| \*Denotes the Primary Contact to whom official NCF correspondence is to be sent. Note that all financial reports will be sent to the **Fund** primary contact and can be obtained from that individual. |
| **\* 1.** Name: |       | FAC Member: | [ ]  Yes [ ]  No |
| Mailing Address: |       | [ ]  Work[ ]  Personal | City, State, Zip: |       |
| Business Phone: |       | Home Phone: |       |
| Mobile Phone: |       | Fax: |       |
| Primary Email: |       | [ ]  Work[ ]  Personal | Alternate Email: |       | [ ]  Work[ ]  Personal |
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| **2.** Name: |       | FAC Member: | [ ]  Yes [ ]  No |
| Mailing Address: |       | [ ]  Work[ ]  Personal | City, State, Zip: |       |
| Business Phone: |       | Home Phone: |       |
| Mobile Phone: |       | Fax: |       |
| Primary Email: |       | [ ]  Work[ ]  Personal | Alternate Email: |       | [ ]  Work[ ]  Personal |
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| **3.** Name: |       | FAC Member: | [ ]  Yes [ ]  No |
| Mailing Address: |       | [ ]  Work[ ]  Personal | City, State, Zip: |       |
| Business Phone: |       | Home Phone: |       |
| Mobile Phone: |       | Fax: |       |
| Primary Email: |       | [ ]  Work[ ]  Personal | Alternate Email: |       | [ ]  Work[ ]  Personal |
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| **4.** Name: |       | FAC Member: | [ ]  Yes [ ]  No |
| Mailing Address: |       | [ ]  Work[ ]  Personal | City, State, Zip: |       |
| Business Phone: |       | Home Phone: |       |
| Mobile Phone: |       | Fax: |       |
| Primary Email: |       | [ ]  Work[ ]  Personal | Alternate Email: |       | [ ]  Work[ ]  Personal |
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| **5.** Name: |       | FAC Member: | [ ]  Yes [ ]  No |
| Mailing Address: |       | [ ]  Work[ ]  Personal | City, State, Zip: |       |
| Business Phone: |       | Home Phone: |       |
| Mobile Phone: |       | Fax: |       |
| Primary Email: |       | [ ]  Work[ ]  Personal | Alternate Email: |       | [ ]  Work[ ]  Personal |
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| **6.** Name: |       | FAC Member: | [ ]  Yes [ ]  No |
| Mailing Address: |       | [ ]  Work[ ]  Personal | City, State, Zip: |       |
| Business Phone: |       | Home Phone: |       |
| Mobile Phone: |       | Fax: |       |
| Primary Email: |       | [ ]  Work[ ]  Personal | Alternate Email: |       | [ ]  Work[ ]  Personal |
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| **7.** Name: |       | FAC Member: | [ ]  Yes [ ]  No |
| Mailing Address: |       | [ ]  Work[ ]  Personal | City, State, Zip: |       |
| Business Phone: |       | Home Phone: |       |
| Mobile Phone: |       | Fax: |       |
| Primary Email: |       | [ ]  Work[ ]  Personal | Alternate Email: |       | [ ]  Work[ ]  Personal |
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| **8.** Name: |       | FAC Member: | [ ]  Yes [ ]  No |
| Mailing Address: |       | [ ]  Work[ ]  Personal | City, State, Zip: |       |
| Business Phone: |       | Home Phone: |       |
| Mobile Phone: |       | Fax: |       |
| Primary Email: |       | [ ]  Work[ ]  Personal | Alternate Email: |       | [ ]  Work[ ]  Personal |
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| **9.** Name: |       | FAC Member: | [ ]  Yes [ ]  No |
| Mailing Address: |       | [ ]  Work[ ]  Personal | City, State, Zip: |       |
| Business Phone: |       | Home Phone: |       |
| Mobile Phone: |       | Fax: |       |
| Primary Email: |       | [ ]  Work[ ]  Personal | Alternate Email: |       | [ ]  Work[ ]  Personal |
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| **10.** Name: |       | FAC Member: | [ ]  Yes [ ]  No |
| Mailing Address: |       | [ ]  Work[ ]  Personal | City, State, Zip: |       |
| Business Phone: |       | Home Phone: |       |
| Mobile Phone: |       | Fax: |       |
| Primary Email: |       | [ ]  Work[ ]  Personal | Alternate Email: |       | [ ]  Work[ ]  Personal |
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