

# Personal Plans Employer Status Form

**SUBMIT THE FOLLOWING INFORMATION:**

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Employer name (used for tax filing): \_\_\_\_\_

GuideStone account number: \_\_\_\_\_ Tax EIN (9 digits): \_\_\_\_\_ - \_\_\_\_\_

Billing address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Street address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Number of full-time and part-time employees currently on the payroll:

1—10 employees       11—19 employees       20—99 employees       100 or more employees

Employer telephone number: (\_\_\_\_\_) \_\_\_\_\_ Employer fax number: (\_\_\_\_\_) \_\_\_\_\_

Contact name: \_\_\_\_\_ E-mail address: \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_/\_\_\_\_/\_\_\_\_

**Return completed form to:** Insurance Operations — Personal Plans  
GuideStone Financial Resources, SBC  
5005 LBJ Freeway, Ste. 2200  
Dallas, TX 75244-6152

**Or fax to:** (877) 834-1025

