

The Combined Fund Initial Purchase Application

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Investor Nan	ne:						Account Nun	nber:		
Name of Parish/Organization:										
Name of Fund (if different from above):										
Tax Ide	en <u>tification Number:</u>									
Address:							Phone Number:			
City / State:										
ZIP:										
		Ţ								
Purchase Instructions:				The Combined Fund (check one):						
				Long-Term Legacy Investment Pool (Original Combined Fund)						
				Mid-Term Capital Investment Pool						
				Short-Term Income Investment Pool						
				Money Market Fund (Hold Cash Only)						
Income Instructions (check only one)				Hold all Income in The Combined Fund						
•				Remit Check: Quarterly (Long-Term Legacy Fund only)						
				Remit Check: Annually (Long-Term Legacy Fund only)						
				Neither (Keep All Income in Money Market Fund)						
Statement Instructions (check one)				, i						
				Send Statements Annually Only						
Form of Doymont /sheek				Send Statements Annually and Quarterly						
Form of Payment (check one):			By Check:		: \$		Trustees of Funds and Endowments, Inc.			
			M			Mail to:	Jill Heller, Executive Director Trustees of Funds and Endowments, Inc.			
							P. O. Box 1359 Lake Geneva, WI 53147-1359			
			D 14"		Φ.		Lake Geneva	, VVI 5	3 14 <i>1</i> - 1339	
			By Wire:		\$		Jill Heller, Executive Director			
			C		Contact:	For Wire Instructions				
Signature On behalf of the parish/organization, I sign this application and certify that the taxpayer identification number is correct. We understand investments in The Combined Fund can be purchased and sold at any time of the month. We agree to give written notice of our intention to withdraw to the Trustees of Funds and Endowments, Inc. (c/o Jill Heller, P.O. Box 1359, Milwaukee, WI 53147-1359 or JillHellerTFE@gmail.com) at least 15 days prior to the date funds are needed. If we intend to withdraw more than \$100,000, we understand that we must give notice to the Trustees of Funds and Endowments, Inc. at least six weeks prior to the date funds are needed.										
Signature					Data					
Signature				Date						
Type or Print Name					Title					
Acceptance On behalf of the Trustees of Funds and Endowments, Inc.,										
Ву:	By:						Date:			