

The Combined Fund

			initia	ai Purc	cnase Appile	cation		
Investor Name						Account Number To be assigned by TFE		
Name of Benefiting Parish/Entity						To so doorgroup in E	<u>: 1</u>	
Name of Fund (Building Fund, Smith Memorial, etc.)								
Tax Identification Number of Benefiting Parish/Entity								
Purchase Instructions (check one)				-	Long-Term Investment Pool			
					Mid-Term Investment Pool			
					Short-Term Investment Pool			
					Money Market Pool			
Income Instructions (check one)					Reinvest Income into The Combined Fund			
					Distribute Income*: Quarterly (Long-Term Pool only)			
						come*: Annually (Long-Term Pool only)		
					Accumulate Income in the Money Market Fund (Long-Term Pool			
Form of initial De	posit				only)			
(check one)			By Check: \$			Payable to Trustees of TMI Trust	Funds and Endowments, Inc.	
	Mail payment with				this form to: Attn: TFE-LOD			
	Plea	ase also send			115 S 84 th St., Suite 32 Milwaukee, WI 53214	<u>!</u> 5		
			to director(@tfewis	s.org	Willwadkoo, Wi Goziii		
		Wire: \$				lim Mondon Evacutive	Director	
For ACH or Wire or Other Instructions, contact:						Jim Wenzler, Executive Director director@tfewis.org, (414) 301-1410		
I understand the made after the Combined Fundament For withdrawal Trustees of Fundaments, *Income distribute	nat deposits close of a rid can be mades from the Lounds and Erom the money withdraw minc. at least soutions will be	to and monthly de at a ong, M ndowm y mark nore th six week	I withdrawals from the program of th	om the eriod. [month.] erm pool by the e to give undedate fur erish/en	Long, Mid and Deposits to an Fee and other ols, we agree to 20 th day of the written notice erstand that which are needed tity instruction	d withdrawals from the Mainformation can be found to give written notice of othe month prior to the metal least 15 days prior to the must give notice to the d.	ne Combined Fund will be Money Market Pool of The	
Signature					Date			
Type or Print Name		Title						