

## LETTER OF INSTRUCTION

Organization Name:	
Organization Address:	
Account Name/Number(s):	
Apply to all Accounts for	Organization
Authorized Signers: The above organization hereby authorized account(s). Please indicate the number of signatures required resolution or documentation authorizing each listed individual to	to withdraw funds Please submit a corporate
Signature	Signature
Name/Title	Name/Title
Signature	Signature
Name/Title	Name/Title
Investment Options: The above organization hereby author Please indicate the percentage to be investigated.	izes the following investments for the above account(s). sted in each fund, percentages must total 100%.
% Demand Cash Fund	% Conservative Allocation Fund
% Spending Plan Fund	% Moderate Allocation Fund
% Fixed Income Fund	
Special Instructions:	
Income Instructions: The above organization hereby author  Please indicate the selection for how in	
☐ Pay out all income quarterly	☐ Hold income until requested
☐ Reinvest income like principal	Other
By signing below, I (or we) affirm that the Foundation organization's investment or distribution guidelines at the Foundation's Disclosure Statement.	
Authorized Signature:	Date:
Foundation Signature:	Date: