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PLAN ACCOUNT INVESTMENT DIRECTION

Use this form to initiate an investment direction on a Plan account. For assistance with this form, contact a Client Service Specialist during regular business hours at 866.384.1815. (Hours: Monday - Friday, 8:00 am to 4:30 pm CT.)

A Participant Information

Name:

Millennium Account No.:

Daytime Telephone No.:

Last Four (4) Digits of Social Security No.:

Date of Birth:

E-mail Address:

B Allocation of Current Account Balance and Future Contributions

List the Mutual Fund(s) along with the investment percentages to be allocated to each fund. Contributions must be remitted to Millennium Trust Company by your employer.

Note: Percent total must equal 100% with investment elections in increments of 10%.

Please select one option. ▶

- Reallocate my current account balance as well as future contributions.
- Allocate future contributions only. Existing balances should remain as currently invested.

Mutual Fund Name	Ticker	Share Class	Percentage

C Employer Information

Employer Name:

Address:

City:

State:

Zip:

Name of Contact Person:

Telephone No.:

Please continue to page two to complete this form.



D Participant's Acknowledgement And Signature

I have received, read, and agree to be bound by the terms of the prospectus for each fund in which I am investing. I have the authority and legal capacity to purchase mutual fund shares, I am of legal age in my state, and I believe each investment is suitable for me. I also attest that the investment(s) that I have chosen are certified in the state of my employment.

I understand that the above elections will remain in effect until I notify Millennium Trust Company of any investment changes by completing and submitting a new Plan Account Investment Direction. I also understand that changes made to my account will be processed within a reasonable amount of time after Millennium Trust Company receives my fully completed form.

Please read, sign, and date to authorize this transfer.

▶ Participant's Signature: _____

Date: