

# IMET NEW ACCOUNT APPLICATION FORM



**IMET**  
ILLINOIS METROPOLITAN  
INVESTMENT FUND

**INSTRUCTIONS:** Complete this application to open a new account with the Illinois Metropolitan Investment Fund (IMET). This application must be submitted along with evidence of authority to participant in IMET in order to be accepted and processed. Please submit the completed application and additional documentation to IMET at [IMETRequests@imetfunds.com](mailto:IMETRequests@imetfunds.com) for processing. For additional information or for assistance with the application, call IMET at 888.288.IMET (4638).

## INVESTMENT REGISTRATION INFORMATION

|                                    |               |
|------------------------------------|---------------|
| NAME OF ENTITY                     |               |
| ACCOUNT TITLE (E.G., GENERAL FUND) | ATTENTION TO: |
| STREET ADDRESS                     | PHONE NUMBER  |
| CITY, STATE, ZIP CODE              | EMAIL ADDRESS |

## TAXPAYER CERTIFICATION

**NOTE:** Failure by non-exempt taxpayers to furnish the correct taxpayer identification number will result in the current IRS backup withholding rate of taxable dividends, capital gains, and proceeds of redemptions and exchanges to be imposed under federal tax regulations.

|                       |
|-----------------------|
| FEDERAL TAX ID NUMBER |
|-----------------------|

SUBJECT TO BACKUP WITHHOLDINGS? ☐ YES ☐ NO

## BANK PAYEE INFORMATION

PLEASE SELECT: ☐ WIRE ☐ ACH ☐ BOTH

**NOTE:** Routing/ABA numbers may vary depending on transaction type. Please verify information with your bank prior to submitting.

BANK ACCOUNT TYPE (SELECT ONE): ☐ CHECKING ☐ SAVINGS

|                                 |                                                      |
|---------------------------------|------------------------------------------------------|
| BANK NAME                       |                                                      |
| REGISTERED NAME ON BANK ACCOUNT | BANK ACCOUNT NUMBER                                  |
| BANK ADDRESS                    | BANK ABA/ROUTING NUMBER                              |
| BANK CITY, STATE, ZIP CODE      | FOR FURTHER CREDIT (FFC) OR FOR THE BENEFIT OF (FBO) |

AFTER THIS ACCOUNT APPLICATION HAS BEEN APPROVED AND PROCESSED BY IMET, BANKING INSTRUCTIONS TO DEPOSIT FUNDS INTO THE ACCOUNT WILL BE PROVIDED UPON REQUEST.

## INVESTMENT CERTIFICATION AND AUTHORIZATION

**By signing this new account application form, the undersigned, under penalty of perjury:** (1) Represents and warrants that he/she has the power and authority to make the investment(s) applied for pursuant to this application. (2) Has reviewed IMET'S information package, and IMET's Fourth Amended and Restated Declaration of Trust before signing this application; the undersigned further warrants that he/she has the authority and power to participate in IMET and agrees to be bound by IMET's Declaration of Trust; investments in IMET are subject to the terms of these documents. (3) Agrees that the Illinois Metropolitan Investment Fund, its investment advisor, administrator and custodian, and any of their subsidiaries, and the respective officers, directors, trustees, employees and agents of each of the foregoing shall be indemnified and held harmless by the undersigned from and against any loss, damage, expense or cost (including but not limited to attorney's fees) for acting upon any instructions or inquiries believed genuine. (4) Agrees to receive transaction confirmations and monthly account statements in electronic format only; users with online access will receive a notification email when statements are available for online viewing. (5) Certifies that the tax identification number provided for this entity is true, correct and complete. (6) Agrees that the information, authorizations, and certifications set forth in or attached to this application shall remain in full force and effect until IMET receives written notification of change.

|                           |       |
|---------------------------|-------|
| SIGNATURE                 | TITLE |
| PRINT FIRST AND LAST NAME | DATE  |