

U N I T E D  
M E T H O D I S T  
F O U N D A T I O N  
O F M I C H I G A N

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**Participant Agreement to Change Annual Allocation  
Collective Investment Funds of Michigan, LLC**

The undersigned participant submits this agreement to the United Methodist Foundation of Michigan regarding the allocation of account number(s) \_\_\_\_\_.

**The money is to be invested as follows:**

_____	100% Balance Fund
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**OR Specify Percentages Below (To be equal to 100%)**

_____	% Stock Fund
_____	% Bond Fund
_____	% Money Market Investment Account
<b>100</b>	<b>% Total</b>

Rebalance the account annually to the above allocation? Yes _____ NO _____
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**Authorized Signatures**

Date:	_____
Signature:	_____
Print Name:	_____
Contact Info:	_____

Date:	_____
Signature:	_____
Print Name:	_____
Contact Info:	_____

