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## FLORIDA MUNICIPAL INVESTMENT TRUST Diversified Large Cap Equity Portfolio

Please complete, scan, and send to <a href="mailto:dbucklin@flcities.com">dbucklin@flcities.com</a>.

## NOTE:

The Administrator presumes any facsimile or duplicate of this original signed document is a true copy of the original signed document and the Administrator is authorized to act according to the facsimile or duplicate.

Notice of Contribution or Redemption	
Account Title:  Entity Number (8 digits):   _	(Please only check one.)
Amount:	
Contributions must be received by the Custodian Bank on the da	te that the Portfolio is valued.
Contributions can be remitted by wire transfer through the	e Federal Reserve. See wire instructions below.
Name of Bank: Bank ABA No./Address: Account Name: Account Number: Further Credit Account Number Account Name:	Northern Trust Bank 071000152 / 50 S. LaSalle St, Chicago, IL Master Trust Wire Account 5186061000 : 4490735 Clearing Account
Contribution can be remitted <u>via ACH</u> . See <u>ACH</u> instruc	etions below.
Name of Bank:	Northern Trust Bank
Bank ABA No./Address: Account Number:	071000152 TR4490735
Notification of contributions or redemptions must be received by the Admi	nistrator three business days prior to a Portfolio Valuation date.
The minimum initial contribution is fifty thousand (50,000) dollars and subseq dollars.  Contributions <u>made by check</u> must be received by the financial institution indi Contact the League office for instructions.  Contributions <u>made by wire transfer</u> through the Federal Reserve or <u>by ACH</u> than the day of a Portfolio Valuation. Only contributions received and collecte on the net asset value of the Portfolio as determined on the Portfolio Valuation	cated above five business days prior to a Portfolio Valuation date.  must be received by the financial institution indicated above not latered in a timely manner will be credited to the Member's account based
Signature and Authorization (Must be signed by one or mor	e persons as specified on the account's Signature Card.)
The undersigned hereby notifies the Administrator of the above-specific The undersigned affirms that he/she has the authority to invest funds on <b>Date:</b> /	
Signature Sig	gnature
FOR INTERNAL USE ONLY:	

FUNDS RECEIVED/SENT BY CUSTODIAN ON: