



# Letter of Instruction Form

**Regular Mail:** Thompson IM Funds  
c/o U.S. Bank Global Fund Services  
P.O. Box 701  
Milwaukee, WI 53201-0701

**Overnight Delivery:** Thompson IM Funds  
c/o U.S. Bank Global Fund Services  
615 E. Michigan St., FL3  
Milwaukee, WI 53202-5207

For additional information please call toll-free (800) 999-0887 or visit us on the web at [www.thompsonim.com](http://www.thompsonim.com).

## Account Information

<input type="text"/>	<input type="text"/>
----------------------	----------------------

NAME OF TAXABLE OWNER / TRUST / ENTITY

SSN or TIN OF TAXABLE PARTY

NAME OF JOINT OWNER / CUSTODIAN / GUARDIAN / TRUSTEE / AUTHORIZED SIGNER

NAME OF JOINT OWNER / CUSTODIAN / GUARDIAN / TRUSTEE / AUTHORIZED SIGNER

MUTUAL FUND FAMILY NAME

ACCOUNT NUMBER

ACCOUNT NUMBER

ACCOUNT NUMBER

## Detailed Instructions

I/We, the undersigned, request the following:

## Signatures and Signature Guarantee

If required, a signature guarantee may be obtained from an officer of a bank, savings association, credit union, a member firm of a domestic stock exchange, or the Financial Industry Regulatory Authority, that is an eligible guarantor institution. A notary public is NOT an acceptable guarantor.

TAXABLE OWNER / CUSTODIAN / GUARDIAN / TRUSTEE / AUTHORIZED SIGNER SIGNATURE

CAPACITY

DATE (MM/DD/YYYY)

JOINT OWNER / TRUSTEE / AUTHORIZED SIGNER SIGNATURE

CAPACITY

DATE (MM/DD/YYYY)

SIGNATURE GUARANTEE STAMP

**Note:** We suggest you contact your financial institution to verify the documentation required to obtain a signature guarantee for your specific situation.