RESERVE ACCOUNT WITHDRAWAL REQUEST
SIGNATURE AUTHORIZATION FORM (COOPERATIVE)

Loan Program No.: __________________________ Cooperative Name: ____________________________

Development Name: ____________________________ (the “Development”)
Development Address: ____________________________

Ladies and Gentlemen:

I (We), the undersigned, as the __________________________ of the Cooperative, authorize Illinois Housing Development Authority (“IHDA”) to honor request to issue funds from all reserve accounts for the Development held by IHDA when such requests are authorized in writing by any (one) or (two) of the following person(s).

<table>
<thead>
<tr>
<th>Name</th>
<th>Signature</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

The above mentioned individual(s) have full authority to act on behalf of the Cooperative to authorize disbursement of funds of the Cooperative and/or Development held by IHDA until such time as you are notified in writing of a change in the person(s) so authorized.

I (We), agree to hold IHDA harmless from any liability which may arise due to a written direction from the authorized individual(s) listed above. This agreement shall be in full force and effect and binding upon the Cooperative until written notice shall be given to IHDA by ____________________________ or authorized representative of the Cooperative.

Dated this _____ day of _______________, 20____.

By: ____________________________
Title: ____________________________

STATE OF ______________________ )
COUNTY OF ____________________ )

On this _____ day of _______________, 20____, ____________________________, personally known to me to be the same person whose name is subscribed to the foregoing instrument, appeared before me in person and acknowledged that he/she signed and delivered the said instrument as his/her free and voluntary act.

__________________________________
Notary Public

Commission Expires: ____________________________

RESERVE WITHDRAWAL REQUEST SIGNATURE FORM
(COOPERATIVE) 2/2020