

WorldCommodity FundSM

(WCOMX)

ACCOUNT APPLICATION

Mail to:

WorldCommodity Funds
8000 Town Centre Drive, Suite 400
Broadview Heights, OH 44147
www.worldcommodityfunds.com

Minimum Investment:
Initial: \$5,000 Subsequent: \$100
Questions? Please call:
1-800-595-4922

Use this form only for opening non-IRA accounts. **IMPORTANT:** In compliance with the USA PATRIOT Act, Federal law requires all financial institutions (including mutual funds) to obtain, verify, and record information that identifies each person who opens an account. **WHAT THIS MEANS FOR YOU:** When you open an account, we will ask for your name, address, date of birth, and other information that will allow us to identify you. We may also ask for additional identifying documents.

1. TAXPAYER IDENTIFICATION NUMBER

For joint accounts, provide SSN of first listed owner; For UGMA/UTMA use minor's SSN

Social Security Number or Taxpayer Identification Number

2. ACCOUNT REGISTRATION (Please check one)

Individual

Individual Name (first, middle, last)

U.S. Citizen Resident Alien

Date of Birth

Joint Ownership (Joint tenants with right of survivorship - JTWROS)

Joint Owner's Name -Primary (first, middle, last)

U.S. Citizen Resident Alien

Date of Birth

Joint Owner's Name -Secondary (first, middle, last)

U.S. Citizen Resident Alien

Date of Birth

Gift to Minors (Uniform Gifts/Transfers to Minors UGMA/UTMA)

Custodian's Name (first, middle, last)

U.S. Citizen Resident Alien

Date of Birth

Minor's Name (first, middle, last)

U.S. Citizen Resident Alien

Date of Birth

Trust*

Corporation/Partnership*

Other Entity*

Name of Trust/Corporation/Partnership/Estate, etc.

Name of Trustee(s) / Officer(s) /Partners (to be in registration)

State of Organization

Date of Agreement (mo./day/year)

***You must supply documentation to substantiate existence of your organization. (i.e., Articles of Incorporation/Organization, Trust Agreement, Partnership Agreement or other official documents.)**

3. PERMANENT STREET ADDRESS

(Residential Address or Principal Place of Business)

Street

City, state, zip code

Daytime Telephone

Evening Telephone

Email Address - If you would like to receive information and Fund updates

4. MAILING ADDRESS (if different from street address)

Street

City, state, zip code

Duplicate Confirmations sent to (if any):

Name (first, middle, last)

Street

City, state, zip code

5. YOUR FUND SELECTION

WORLDCOMMODITY FUND Total \$ _____

By check Please make checks payable to WorldCommodity Funds

By wire Please call 1-800-595-4922 for instructions.

Minimum investment: Initial \$5,000; Subsequent: \$100

6. DISTRIBUTION OPTIONS

All distributions will be reinvested into additional Fund shares unless you indicate otherwise: Please choose one below:

Capital gains & dividends reinvested (default)

Capital gains reinvested & dividends in cash*

Capital gains & dividends in cash*

**Cash distribution payments by check will be mailed to the address on file.*

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7. TELEPHONE REDEMPTION OPTION

You can sell shares of your Fund by phone (\$100,000 maximum per day) and a check will be sent to your address of record. You will not be able to redeem by telephone and have a check sent to your address for a period of 15 days following an address change. You will automatically be granted telephone redemption privileges unless you decline them by checking the box below:

- I accept this option (default)
- I decline this option. All requests to redeem shares from this account must be submitted in writing.

8. SIGNATURES (All account owners/trustees must sign)

I have received and read the current prospectus for the WorldCommodity Funds Inc. I understand the Fund's investment objectives and policies and agree to be bound by the terms of the prospectus. I represent that I have the authority and legal capacity to make this purchase and that I am of legal age in my state of residence.

Under penalty of perjury, I certify that:

1. The Social Security Number or Taxpayer Identification Number shown on this application is correct.
2. I am not subject to backup withholding either as a result of a failure to report all interest or dividends, or the IRS has notified me that I am no longer subject to backup withholding.
3. I am a U.S. person (including a U.S. resident alien).

The Internal Revenue Service does not require your consent to any provision of this document other than the certifications required to avoid backup withholding.

Signature of Individual Owner, Trustee or Custodian Date

Signature of Joint Owner, Trustee or Custodian Date

Signature of Additional Owner (if any) Date

Print name and title of officer signing for a corporation or other entity

Checklist. Before mailing, have you:

- Completed all USA Patriot Act required information?
Social Security or Tax ID Number in section 1?
Birth Date in section 2?
Full Name in section 2?
Permanent Street Address in section 3?
Enclosed additional documentation, if applicable?
- Enclosed your check made payable to WorldCommodity Funds?
- Enclosed completed Transfer Form, if applicable?
- Signed your application in section 8?