## Altimum Mutuals Inc.

## Fundfacts Receipt and Pre-trade Cost Disclosure

The companies who manage Mutual Funds for you have designed forms which summarize key points about the funds you are purchasing, including investment objectives, past performance, suitability, and fees, called a Fundfacts Document. A Mutual Fund Dealer such as Altimum Mutuals Inc. has a responsibility to deliver a Fundfacts document for each fund that you wish to purchase before the Dealer accepts the purchase instructions. The purpose of this document is to have you acknowledge receipt of the Fundfacts documents and to acknowledge that you understand any fees and charges prior to you purchasing the funds.

A. I acknow	ledge having received	Fundfacts documents for	or each of the following	g funds:
a)				
b)				
c)	SINDHAW TAN INC. III AND			
d)				
e)				
f)	and the second s			
(for a	dditional funds, use a sepa	rate Confirmation of Receipt	document)	
investment product. T Deferred Sales Charg understood and accep such fees I shall be ac such transaction and	There may also be fees of the sees of the	charged at the time that he in cases. My representation of that prior to the acceptarges, service charges or a captive dy Altimum Mutu	withdraw money or clove has explained these jance of any order in my my other fees that might als Inc. to keep a recor	v account that would trigger at be charged in respect of ad of that disclosure.
B. With reg	gard to my purchase to	oday I understand and a	cknowledge the follow	ing fees or charges:
1. DSC fees in the eve	ent of early redemptio	on (if applicable) would l	pe applied according to	the following schedule:
	In year 1%			
	In year 2%			
	In year 3%			
	In year 4%		297	
	In year 5%			
	In year 6%			
	In year 7%			
	In year 8%			
2. Trailer fees (if app	olicable) would be paid	d to my dealer as follows	:	
	At the rate of			
	At the rate of	% indefinitely thereaf	ter.	
BY SIGNING BELOW	I ACKNOWLEDGE T	HAT I HAVE RECEIVED	A COPY OF THIS FO	RM.
Client Signature		Name		Date
Joint Client/Guaranton	r's Signature	Name_		Date
Rep Signature	*		Rep Code 7767	Date
Compliance Officer Ar	oproval (Signature)			Date