SPE Joinder Agreement – Fall 2022



IN WITNESS WHEREOF, the undersigned has executed this Joinder to Limited Partnership Agreement of Scholarship Our Students Fund as of the date set forth below next to the undersigned's signature.

IF AN INDIVIDUAL OR 2 INDIVIDUALS SIGNING JOINTLY:	IF A LEGAL ENTITY:
(Print Name)	(Print Name of Legal Entity)
(Signature of Person's Whose Name is Printed Above)	(Signature)
(Print Name)	(Print Name & Title of Authorized Individual Signing for Entity)
(Signature of Person's Whose Name is Printed Above)	
DATE:	DATE:
(Mailing Address)	(Mailing Address)
(Email Address)	(Email Address)
(Social Security #) (Social Security #)	(EIN #)
AMOUNT OF 1st YEAR CAPITAL CONTRIBUTION (due upon acceptance):	AMOUNT OF 2 nd YEAR CAPITAL CONTRIBUTION (due at General Partner's request):
\$NOTE: Minimum of \$3,500 unless otherwise determined.	\$NOTE: Same as INITIAL Capital Contribution
FUND ALLOCATION (optional): Fund Manager is to use nattending the following EITC/OSTC qualified school (entries b	
Name of School: Our Lady of the Cross School	1st Year Amount: \$
Name of School: Our Lady of the Cross School	2 nd Year Amount: \$
IF THE ABOVE OPTIONAL DIRECTION IS LEFT BLANK, capi	ital contributions will be regarded as undesignated by the fund manager.
CHECK CONTRIBUTION IS ONLY TO BE SUBM	IITTED AFTER RECEIPT OF APPROVAL LETTER!
Randy Tarpey, in his capacity as General Partner of the parties identified above as a Limited Partner of the Partnership	e Partnership, hereby accepts this Joinder and admits the party or as of the date set forth next to the signature below.
	Scholarship Our Students Fund
DATE: BY:	
	Randy Tarpey, General Partner
DATE: BY:	Randy Tarpey, General Partner

Send forms to: Scholarship Our Students Fund <u>Central Pennsylvania Scholarship Fund</u>,
Attn: Tami Clark or Randy Tarpey, 227 Jefferson Avenue, Tyrone, PA 16686

Note: *Central Pennsylvania Scholarship Fund* will contact you in the 4th quarter when it is time to submit your donation check.