

Volumetric Fund c/o Ultimus Fund Solutions PO Box 46707 Cincinnati, OH 45246 Overnight Mail: 225 Pictoria Dr, Suite 450, Cincinnati, OH 45246 Fax (402) 963-9094

, certify that:

We require this form to be completed by the Attorney-in-Fact named under the Power of Attorney and submitted along with a full and complete copy of the Power of Attorney as well as any applicable riders or addendums. Any event or contingency documentation required by the Power of Attorney must also be submitted.

ACCOUNT HOLDER
Full Name:
Account Number(s):

ATTORNEY-IN-FACT			
Full Name:		Social Security Number:	
Street Address (no P.O. Box):			
City:		State:	Zip Code:
Daytime Phone:	Birthdate:	Email:	

ATTORNEY-IN-FACT CERTIFICATION

Note: We require this section to be completed prior to processing any transaction submitted by the Attorney-In-Fact

Ι,

a. The Principal validly executed, in accordance with state law, a Power of Attorney ("POA") dated ______, appointing me as his/her Attorney-in-Fact. Attached to this certification is a true and complete copy of the POA.

b. This POA is now in full force and effect. The Principal is now living and I have received no notice that the Principal has revoked or suspended this POA.

- c. If the POA was drafted to become effective upon the happening of an event or contingency, that event or contingency has occurred. Any proof of the event or contingency required by the POA is attached.
- d. If the POA has an expiration date, I acknowledge that the powers granted will expire as per the date referenced in the POA.
- e. I make this certification for the purpose of inducing Ultimus to accept delivery of the attached instrument(s) as executed by me in my capacity as Attorney-in-Fact of the Principal, with full knowledge that this certification will be relied upon by Ultimus in accepting the instrument(s) affecting Ultimus Account Number(s) provided in the Account Holder section of this form.

SIGNATURES

By signing this form, I agree and request to be added to the account stated above as Power of Attorney. This form must be signed in the presence of the person guaranteeing your signature.

torney-in-Fact's Signature	Date
	Date

Medallion Signature Guarantee Stamp

A signature guarantee assures a signature is genuine and protects you from unauthorized requests on your account.