



INVESTMENT FORM FOR MINOR

Internal use only 08.11 Ver.2.0

DCI Acct No.:

- You may purchase directly via <https://online.Israelbonds.com> in lieu of completing this form.
- Personal checks must be payable to State of Israel. Bank, Certified and Cashier's checks, and money orders will not be accepted.
- If you have not reviewed the prospectus, you can download it from [www.Israelbonds.com](http://www.Israelbonds.com) or request it from your local office and sales rep.
- DCI does not disclose non-public personal information about its current and former customers to anyone, except as permitted by law.

Please Print Clearly **PURCHASER INFORMATION (Must be 18 years or older)**

Account Name: \_\_\_\_\_ Home #: \_\_\_\_\_ Work #: \_\_\_\_\_  
 Mailing Address: \_\_\_\_\_ Mobile #: \_\_\_\_\_ Email: \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Gift From: \_\_\_\_\_  
 Gift Message: \_\_\_\_\_

**BOND INFORMATION - TYPE OF BOND**

Instrument	Years to Maturity (Check one white box only)										Denomination
	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
Mazel Tov Bond	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$100 min w/ increments in \$10 multiples, max \$2500 per purchaser per holder per day
Sabra Bond	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$1,000 and integral multiples of \$500
Maccabee Bond	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$5,000 min w \$1,000 mult if w/in 12 mos of initial purchase
Jubilee Bond	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$25,000 minimum with \$5,000 multiples if within 12 mos of initial purchase
Floating Rate Libor	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$5,000 min w \$1,000 multi if w/in 12 mos of initial purchase
Floating Rate Libor - Finance	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	\$100k min. with \$25k multiples if within 12 mos of initial purchase (Financing Only)

<b>TOTAL PURCHASE AMOUNT</b> Please make check payable to <u>State of Israel</u> \$ _____	<b>REFUND</b> Only from Redemption Check. \$ _____	<b>Bonds are issued in book entry form.</b> Only government agencies, pension plans, employee benefits/IRA plans, and financial institutions can request a certificate to be issued at time of purchase. Check if certificate requested ( ).
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**REGISTERED OWNER INFORMATION**

Use only for minor registrants (under 18 years of age) **Address:** \_\_\_\_\_  
**Custodian (1 Adult):** \_\_\_\_\_  
**Minor (1 Child):** \_\_\_\_\_  
**UTMA/UGMA (State):** \_\_\_\_\_  
**SSN/TIN:** \_\_\_\_\_ **Phone:** \_\_\_\_\_ **E-mail:** \_\_\_\_\_

Provide /verify primary registered owner's phone and e-mail address to enable the owner to be contacted regarding the account for maturing bonds, interest information, etc.

**Bond/Statement and Interest will be sent to registered owner unless instructed otherwise below.**

SEND BOND/STATEMENT TO:	SEND INTEREST PAYMENTS TO:	CONTACT INFORMATION
		<b>Return Investment Form to:</b> State of Israel Bonds Central Processing Department P.O. Box 5263 New York, NY 10150-5263

**What influenced you to make this purchase?** \_\_\_\_\_

**Did you have contact with a DCI Sales Rep regarding this purchase?**  
 Yes ( )  
 No ( ) Name of Rep: \_\_\_\_\_