



**SPE 4 K-12**

**2023**

**PENNGIFT SPE 4 LLC JOINDER**

IN WITNESS WHEREOF, the undersigned has executed this Joinder to the Operating Agreement of Penngift SPE 4 LLC as of the date set forth below the undersigned's signature.

IF AN INDIVIDUAL OR TWO INDIVIDUALS SIGNING JOINTLY:

IF A LEGAL ENTITY (Business):

\_\_\_\_\_  
Print Name # 1:

\_\_\_\_\_  
Print Name of Legal Entity

\_\_\_\_\_  
Signature of person whose name is printed above

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Print Name #2:

\_\_\_\_\_  
Print Name & Title of Authorized Individual signing for Entity

\_\_\_\_\_  
Signature of person whose name is printed above

\_\_\_\_\_  
Phone Number

Date: \_\_\_\_\_

Date: \_\_\_\_\_

House#/Street: \_\_\_\_\_

Bldg#/ Street: \_\_\_\_\_

City: \_\_\_\_\_, PA Zip: \_\_\_\_\_

City: \_\_\_\_\_, PA Zip: \_\_\_\_\_

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Email Address

\_\_\_\_\_  
Social Security # for # 1

\_\_\_\_\_  
Social Security # for # 2

\_\_\_\_\_  
Employer Identification Number (EIN)

Phone: \_\_\_\_\_

TOTAL AMOUNT OF CONTRIBUTION: \$ \_\_\_\_\_

Please designate the contribution to the school(s) listed below.

Name of School	Amount of Contribution for 2023	
Lancaster Mennonite School	\$	
	\$	
	\$	

Jerald M. Birmelin, as Managing Member of Penngift SPE 4, LLC, upon receipt of the amounts set forth above and a signed copy of this Joinder does hereby admit the party or parties identified above as a member of the LLC as of the date set forth next to my signature below.

PENNGIFT SPE 4 LLC

Date: \_\_\_\_\_

\_\_\_\_\_  
Jerald M. Birmelin, Managing Member (610) 286-1936

**Make Check Payable to:**  
**PENNGIFT SPE 4 LLC**

**Mail Check & Joinder to:**  
**Penngift Foundation, Inc.**  
**P.O. Box 121**  
**Elverson, PA 19520**