|  |  |  |
| --- | --- | --- |
| **Firm: General Information** | **Date of Completion:** | **MM/DD/YYYY** |
|  |  |
|  |  | Street: |
|  | **Firm Name or Business Unit that is Raising Capital (the “Firm”):** | City: |
|  | **Address:** | State/Country: |
|  |  | Postal/Zip Code: |
|  |  | Phone Number: |
|  | **Regulatory Body(s) that Supervises Firm:** |  |
|  | **Regulatory Body(s) Registration Number(s):** |  |
|  |  | Name: |
|  | **Firm Contact (for requesting additional information):** | Title: |
|  |  | Phone Number: |
|  |  | Email Address: |
|  |  |  |  |  |  |  |  |  |
|  | **Investment Advisor Entity (the “Manager”):**  |
|  | **General Partner Legal Name (the “GP”):**  |
|  | **Fund Legal Name (the “Fund”):**  |
|  | **Regulatory Body(s) that Supervises the Manager:**  |
|  | **Regulatory Body(s) Registration Number(s):**  |
|  |  |
|  | **Fund Size:** | Targeted Amount: |  |  | **Fund Term:** | First Close Date: |  |
|  | (Reporting Currency)  | Minimum: |  |  | (Date /Years) | Targeted Final Close Date: |  |
|  |  | Maximum/Cap: |  |  |  | Investment Period: |  |
|  |   | First Close Amount: |  |  |  | Follow-on Period: |  |
|  |   | Amount Raised to Date: |  |  |  | Remainder of Term: |  |
|  |   | Total Closings to Date: |  |   |   | Extension Period: |   |
|  |  |  |  |  |  |  |  |
|  | **Management Fees:** | Investment Period: |  | % of | **Misc. Terms:** | Reporting Currency: |  |
|  | (% of Basis) | Follow-on Period: |   | % of | (Fund Only) | Hurdle (%): |  |
|  |   | Extension Period: |   | % of |  | Carried Interest (%): |  |
|  |   |   |   |  |  | Carry Catch-up (%): |  |
|  | **Investment Focus:** | Strategic Focus: |  |  | Carry Escrow (%): |  |
|  | (Fund Only) | Geographic Focus: |  |  | GP Commit. (%): |  |
|  |   | Industry Focus: |  |  |  |  |

**Applicant Author Information and Certification:**

**Name:**

**Phone Number:**

**Email Address: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

I hereby certify that the information contained in this application and in the exhibits or attachments submitted are true and correct to the best knowledge of the applicant and the undersigned and are submitted to the Michigan Economic Development Corporation as a basis for determining whether the Michigan Strategic Fund should authorize a partner agreement.

Author of this document signature --->\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date: