

2. Periodic Investment Plan Instructions *continued*

Fund Name	ROA* <input type="checkbox"/>	Breakpoint* \$	Symbol	Percent %	OR	Amount \$
Fund Name	<input type="checkbox"/>	Breakpoint* \$	Symbol	Percent %	OR	Amount \$
Fund Name	<input type="checkbox"/>	Breakpoint* \$	Symbol	Percent %	OR	Amount \$
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* **Note to Broker/Dealer:** Ensure all applicable Letters of Intent (LOI) and Rights of Accumulation (ROA) have been entered to the customer's account on the brokerage system.

3. Frequency Schedule

We may sometimes process investments later than the date(s) you request. Examples include investments (or contributions) that are scheduled for a day when the stock market is closed (such as a holiday or weekend day) or for a day that doesn't exist in every month (29th–31st). We generally will process the investment on the next business day.

A. Provide the frequency for the movement of funds coming from your source account. If this is an IRA, the funds will move to your core account prior to investing in other mutual funds. If you want the frequency schedule from your core account to your mutual fund investments to be the same, complete this section only. If you want a different frequency schedule for the mutual fund investments, also complete Section B below.

Provide the frequency. ▶ Monthly
 Quarterly
 Custom Months

Check at least 2 months. ▶ Jan Feb Mar Apr May Jun
 Jul Aug Sep Oct Nov Dec

Provide the date of the first investment (Effective Date).
 Effective Date MM DD YYYY

If you are establishing EFT bank standing instructions with this form, your periodic investments cannot begin until after the EFT bank standing instructions are established.

Provide the date of the final plan investment (End Date). **Optional.**
 End Date MM DD YYYY

NOTE: The end date should be a date AFTER the last intended investment.

B. **Optional** — Provide the frequency for the movement of funds from your core account to the mutual fund investments listed in Section 2 ONLY if different from the frequency schedule indicated above.

Provide the frequency. ▶ Monthly
 Quarterly
 Custom Months

Check at least 2 months. ▶ Jan Feb Mar Apr May Jun
 Jul Aug Sep Oct Nov Dec

Provide the date of the first investment (Effective Date).
 Effective Date MM DD YYYY

Provide the date of the final plan investment (End Date). **Optional.**
 End Date MM DD YYYY

NOTE: The end date should be a date AFTER the last intended investment.

4. Signature(s) and Date(s) *Form cannot be processed without signature(s) and date(s).*

By signing below, you:

- Authorize and request National Financial Services LLC ("NFS"), or its agents, to secure payment of amount indicated above to be invested by you by initiating debit entries to your account indicated in the bank named above ("Bank").
- Authorize and request the Bank to accept any such debit entries initiated by NFS or its agents, and to credit such amount to your account indicated on this form.
- Acknowledge that contributions made via EFT to Traditional and Roth IRAs are credited and reported as current year contributions and that contributions made via EFT to SEP-IRAs are credited and reported as employer contributions, and you will not hold NFS responsible for the correctness of such contributions.
- Indemnify Fidelity Management Trust Company and NFS, and their officers, directors, employees, agents, affiliates, shareholders, successors, assigns, and representatives, from any liability for acting upon the authorization provided for these instructions.
- Understand that a trade confirmation will not be delivered to you for each investment in a periodic plan and this activity can be reviewed on your statement.
- Acknowledge this authorization may be terminated by you at any time by written notification received by NFS or your Broker/Dealer and any such notification shall be effective only after receipt of such notification and a reasonable time to act on it.
- Understand that these instructions may be purged from your account if the instructions have not been used for an extended period of time.

Either the account owner(s) or authorized individual(s) of the account receiving the periodic investments must sign and date.

Print Account Owner/Authorized Individual Name <i>First, M.I., Last</i>	
Account Owner/Authorized Individual Signature	Date <i>MM - DD - YYYY</i>
SIGN ▶	▶

Print Additional Account Owner/Authorized Individual Name <i>First, M.I., Last</i>	
Additional Account Owner/Authorized Individual Signature	Date <i>MM - DD - YYYY</i>
SIGN ▶	▶

If the source of the periodic investments is an account that you do not own, your Broker/Dealer may require that the account owner of the source account must sign and date.

Print Source Account Owner Name <i>First, M.I., Last</i>	
Source Account Owner Signature	Date <i>MM - DD - YYYY</i>
SIGN ▶	▶