



# Account Privileges Change Form

**Overnight Delivery:**  
FPA Funds  
803 W. Michigan St.  
Milwaukee, WI 53233-2301

**Regular Mail:**  
FPA Funds  
P.O. Box 2175  
Milwaukee, WI 53201-2175

### 3. TELEPHONE OPTIONS

### 1. CURRENT ACCOUNT INFORMATION

Changes will apply to the following accounts:

Fund	Account Number
Fund	Account Number
Fund	Account Number
Fund	Account Number
SSN or TIN	

Name(s) on Account

### 2. BANK INFORMATION

**This form must be received at least 14 days prior to your initial transaction to establish and confirm your bank information. You must attach a blank, voided check from your bank account to this form. If you are adding or changing bank information after your account has been established, a Medallion signature guarantee is required.**

I would like to:  Add  Change Bank Information

Bank Name

Bank Address

ABA Routing Number      Account Number

Name(s) on Bank Account

#### Account Type

Checking Account     Savings Account

**I authorize the bank listed above for:**

Electronic Funds Transfer (takes 2 – 3 business days)

Wire

**A Medallion signature guarantee is required to add telephone exchange or redemption privileges.**

Add     Delete

Telephone Redemption.

Telephone Exchange. An exchange requires the purchase of shares with a value of at least \$1,000.

### 4. AUTOMATIC INVESTMENT PLAN

If you are adding or changing your bank information, please complete Section 2. Minimum additions to the Fund for auto investments are \$100. Automatic investments can be made on the 5th and/or 20th of each month.

I would like to:

Add     Change Automatic Investment Plan

Monthly     Quarterly (Jan., Apr., July, Oct./Feb., May, Aug., Nov./Mar., June, Sept., Dec.)

Begin investment on mm/yy

<input type="checkbox"/> 5th 20th	<input type="checkbox"/> 10th	<input type="checkbox"/>	<input type="checkbox"/> 25th	\$
Fund				Amount

<input type="checkbox"/> 5th 20th	<input type="checkbox"/> 10th	<input type="checkbox"/>	<input type="checkbox"/> 25th	\$
Fund				Amount

<input type="checkbox"/> 5th 20th	<input type="checkbox"/> 10th	<input type="checkbox"/>	<input type="checkbox"/> 25th	\$
Fund				Amount

Your automatic investment will be withdrawn directly from your checking or savings account named in Section 2 on the date you have selected or the first business day thereafter. You will be assessed a \$10 fee if the automatic investment cannot be made for any reason. If no date is selected, purchases will be made on the 20th of each month.

**5. SYSTEMATIC WITHDRAWAL PLAN**

**If you are adding or changing your bank information, please complete Section 2. Minimum withdrawal for a Systematic Withdrawal Plan is \$50.**

- Monthly
- Quarterly (Jan., Apr., July, Oct./Feb., May, Aug., Nov./Mar., June, Sept., Dec.)
- Semi-annually (indicate month to start)
- Annually (indicate month)

Begin systematic withdrawal on mm/yy

5th  10th  20th  25th \$

Fund Amount

5th  10th  20th  25th \$

Fund Amount

5th  10th  20th  25th \$

Fund Amount

**Payment Method** (check one)

- Check to Address of Record
- Bank Information Currently on Account
- New Bank Information

**Provisions of the Systematic Withdrawal Plan**

FPA Funds' Systematic Withdrawal Plan is available for any shareholder account worth at least \$10,000.

By completing this form, you are appointing FPA Funds as your agent to redeem shares in your account to make periodic payments.

Payments will be made by redeeming the appropriate number of shares in your account at the then current net asset value. Redemptions will be made on the 5<sup>th</sup>, 10<sup>th</sup>, 20<sup>th</sup> and/or 25<sup>th</sup> of each month, or the next business day, and will be paid as specified in the prospectus.

Withdrawal payments should not be regarded as income or yield on your investment, since part of each payment will normally consist of a return of capital. Depending on the size and frequency of your withdrawals and the fluctuations in value of the fund portfolio, using the Plan may reduce or even exhaust your account.

**6. SIGNATURE(S) AND CERTIFICATION**

I (we) certify that I (we) am (are) the account owner(s) authorized to make these elections and that all information provided by me (we) is true and accurate. I (we) authorize the above changes to my (our) "FPA Funds" account. I am (we are) of legal age, have received and read the prospectus and privacy policy and agree to the terms therein.

All registered owners, officers, partners, trustees or custodian must sign.

\_\_\_\_\_  
Signature of Individual, Trustee, Custodian Date

\_\_\_\_\_  
Signature of Joint Owner, Co-Trustee(s), Partner(s), Other Date

\_\_\_\_\_  
Signature of Joint Owner, Co-Trustee(s), Partner(s), Other Date

**7. MEDALLION SIGNATURE GUARANTEE**

A Medallion signature guarantee may be obtained from a member of a national securities exchange, a U.S. commercial bank, trust company or federally chartered savings and loan, or other eligible guarantor institution.

**A notarization from a notary public or a signature guarantee is not acceptable.**

