

TEST PERIODIC INVESTMENT FORM:

Account to be funded:

Funding source

Use current instructions on file:

☐ IBP

☐ First Party ETF

☐ Third Party Etf

Use New Instructions:

Bank account number

Routing Number

Name(s) on account

Name of Bank

MORE FIELDS PLACED ON SECOND PAGE FOR TESTING

Frequency of investment:

☐ Yearly

☐ Monthly

Starting date:

Print name:

Date:

Signature