

Automatic Investment Program Application Form

Mail to: Pearl Mutual Funds, 2610 Park Ave., PO Box 209, Muscatine IA 52761

1-866-747-9030 (toll-free)

563-288-4101(fax)

info@pearlfunds.com (email)



You can invest in any available Pearl Fund automatically by completing the following information and by attaching a voided, unsigned check or savings deposit slip/statement and returning it to Pearl Mutual Funds. You will receive a confirmation of each transaction and the deduction from your bank account will appear on your monthly statement.

By completing this section, you can authorize Pearl Funds to transfer money automatically from your bank account into your account.

- Bank Account Deduction.** Check this box to invest from your bank account. Please invest the amount indicated (minimum \$100.00 per Fund) in the _____ following Fund(s) on or about the (check one):
- 5th Monthly
 - 20th Monthly

Your first automatic investment should occur no later than 30 days after receipt of your application. If no box is checked, the 20th monthly will be selected for you.

Please indicate the Fund(s) in which you wish to make automatic investments:

Pearl Total Return Fund \$ _____

Pearl Aggressive Growth Fund \$ _____

Total Investment \$ _____

Please attach a voided, unsigned check or saving deposit slip/statement for the bank account to be debited. At least one common name must appear on both your checking/savings account and your Pearl Mutual Funds account.

As a convenience to me you are hereby authorized to credit my Pearl Mutual Funds account by electronically debiting my bank account as stated below. I also understand that this service is governed by the Funds' Prospectus provisions as well as the rules of the Automated Clearing House. This authority is to remain in effect until revoked by me in writing, and until you receive such notice, I agree you shall be fully protected in honoring any debit. I further agree that if any such debit be dishonored, whether with or without cause, and whether intentionally or inadvertently, you shall be under no liability whatsoever. This option, if exercised, shall become part of the attached application and the terms, representations and conditions thereof.

Pearl Funds Account Number

Name of Financial Institution

Bank Account Number

ABA/Routing Number

Owner's Name

Co-Owner's Name (if any)

SIGNATURES ARE REQUIRED TO ESTABLISH AUTOMATIC INVESTMENT PROGRAM:

Signature of Owner, Trustee, or Custodian

Date

Signature of Co-Owner or Co-Trustee (if any)

Date