

# Hartford Funds Automatic Investment Form

**Purpose**

To initiate an automatic investment program from your bank.

**Section A - Account Information**

Owner Name	Telephone Number	Account Number	
Physical Address (P.O. Boxes not allowed)	City	State	ZIP Code

**Section B - Automatic Investment Plans**

**Automatic Investing from a Bank Account or Credit Union**

Invest the following amount in the following fund(s). Please be sure your bank or credit union allows funds to be withdrawn by means of electronic funds transfer. Please also complete Section C if you have chosen this investment method.

**1. Initial investment** (a minimum initial investment of \$250 is required)

- Check enclosed     Withdraw my initial investment using Automated Clearing House (ACH)

Amount of initial investment \$ \_\_\_\_\_ Initial investment withdrawal date \_\_\_\_ / \_\_\_\_ / \_\_\_\_

**2. Recurring investment** (A minimum recurring monthly investment of \$50 per fund is required. If amount is left blank, we will default to \$50 per fund.)

- Monthly     Bi-weekly (twice per month): withdraw funds on the \_\_\_\_ and \_\_\_\_ of each month (1st - 28th)  
 Quarterly     Semi-annually     Annually

Amount of recurring investment \$ \_\_\_\_\_ Start date \_\_\_\_ / \_\_\_\_ / \_\_\_\_ (1st - 28th)

Make your fund selection in the table below. For a complete list of funds, please refer to **Fund List AC**, which is available on our website at [Hartfordfunds.com](http://Hartfordfunds.com)

Fund Number	Dollar Amount	Percentage	Fund Number	Dollar Amount	Percentage
_____	\$ _____	OR _____%	_____	\$ _____	OR _____%
_____	\$ _____	OR _____%	_____	\$ _____	OR _____%
_____	\$ _____	OR _____%	_____	\$ _____	OR _____%
_____	\$ _____	OR _____%	_____	\$ _____	OR _____%
_____	\$ _____	OR _____%	<b>TOTAL INVESTMENT:</b>	\$ _____	OR _____%

**Notes:** All investments will be considered current year contributions.

Investments will be made monthly on the day of the month specified (any day, 1st through 28th) as the starting date. If a date is not specified, this option will begin on the 15th of the month.

**Section C - Bank Account or Credit Union Information**

**Important:** By signing this paperwork, you agree and confirm that your use of the "ACH" Network will not result in transfers to or from a financial institution outside of the United States. You also understand it is your responsibility to notify Hartford Funds if any changes to your status occur that may require funds to be sent to or from a financial institution outside of the United States.

**All owners of the bank account must sign this form.**

Bank account type:  Checking account (attach voided check)  
 Savings account (attach deposit slip)

Bank or Credit Union Account Number	Bank or Credit Union Routing Number (must be 9 digits)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Bank or Credit Union Account Owner's Name (print)	Bank or Credit Union Account Owner's Signature				Date (mm/dd/yyyy)				
Bank or Credit Union Account Joint Owner's Name (print)	Bank or Credit Union Account Joint Owner's Signature				Date (mm/dd/yyyy)				

**Note:** If the registration on the bank account is different from the registration on the Hartford Funds account or if this is a new or updated bank account on the record, we require a medallion signature guarantee.

Medallion Signature Guarantee Stamp Here

John Q. Public 0000  
 123 Main Street  
 Anywhere, ST 00000-0000

Pay to the order of \_\_\_\_\_ \$  Dollars

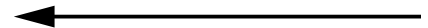
Any Bank  
 Any Town, ST 00000

MEMO \_\_\_\_\_

|:000000000:| 0000000000 XXXX

↓                      ↓  
 Bank Routing Number    Account Number

**Attach a voided check here.  
 Please use tape instead of staples.**



- No Starter Checks.
- Minimum ACH is \$50 per fund per month.
- ACH will arrive in 2-3 business days.
- There is no fee for this option.

**Section D - Cost Basis Information for Non-Qualified Accounts**

Internal Revenue Services (IRS) regulations require fund companies that produce 1099-B tax forms to include, among other things, cost basis reporting and holding period information for shares purchased on or after January 1, 2012.

If your transaction will add to an existing account, the cost basis method previously elected and on file will apply. If your transaction will add a new fund to an existing account and you have not previously informed us of an election method that can be applied to new funds, the default method of Average Cost (ACST) will be placed on the new fund. To elect a different cost basis method, complete the Cost Basis Method Election Form (MF-10087) and submit it with this form.

Hartford Funds cannot offer tax advice. You should consult with a qualified tax advisor to determine the method that makes the most sense for you, or if you have any other tax questions regarding your account.

**Section E - Authorization and Signature (required)**

Please sign and date the authorization below.

I (we) authorize Hartford Funds to initiate debit entries, credit entries and if necessary adjustments for any debit entries in error to my (our) account indicated above and the depository named above, herein after called DEPOSITORY, to debit and/or credit the same to such account. This authority is to remain in full force and effect until Hartford Funds has received written notification from me (or either of us) of its termination in such time and in such manner as to afford Hartford Funds and Depository a reasonable opportunity to act on it. I (we) should allow at least 30 days (from receipt of initial payment for new accounts) for the first withdrawal to occur and that deposits will be allocated to the funds within the above indicated Hartford Funds account according to the allocation instructions.

Owner Name	Owner Signature	Date (mm/dd/yyyy)
Joint Owner Name	Joint Owner Signature (if applicable)	Date (mm/dd/yyyy)

**Fax this completed form to (888) 802-0039,  
or mail it to the appropriate address below.**

**For standard mail delivery,  
please mail this form to:**

Hartford Funds  
P.O. Box 219060  
Kansas City, MO 64121-9060

**For private express mail,  
please mail this form to:**

Hartford Funds  
430 W 7th Street Suite 219060  
Kansas City, MO 64105-1407

If you have questions or require more information, contact your financial advisor or call Hartford Funds at (888) 843-7824.