College Savings Iowa®

1. Account Information

Recurring Contribution (Automatic Investment Plan)/ Electronic Bank Transfer Form



- Complete this form to start, change, or discontinue recurring contributions (also known as automatic investment plan or AIP) from your bank account or to add, change, or delete bank account information for **periodic contributions** by electronic bank transfer. Submit a separate form for each College Savings lowa account you own.
- To add or change instructions for recurring contributions by payroll deduction, use the Payroll Deduction Instruction Form.
- You can start, change, or discontinue your recurring contributions by accessing your accounts online at collegesavingsiowa.com.
- Print clearly, preferably in capital letters and black ink.

Important: Allow three business days from the date we receive this form to establish or change your options. Afterward, each contribution will be credited to your account on the business day before it is debited from your bank account. Changes to, or the termination of, recurring contributions must occur at least five business days before a recurring contribution debit is scheduled to be deducted from your bank account.

Forms can be downloaded from our website at **collegesavingsiowa.com**. Or you can call us toll-free to order any form—or get assistance in filling out this one—at **888-672-9116** on business days from 8 a.m. to 9 p.m., Eastern time. Return this form in the enclosed postage-paid envelope, or mail to: **Michael L. Fitzgerald, Treasurer of State, College Savings lowa, P.O. Box 219219, Kansas City, MO 64121-9219**. For overnight delivery or registered mail, send to: **Michael L. Fitzgerald, Treasurer of State, College Savings lowa, 920 Main Street, Suite 900, Kansas City, MO 64105-2017**.

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Account	Number
Name o	of Participant (first, middle initial, last)
Daytime	Telephone Number Evening Telephone Number
•	of Beneficiary (first, middle initial, last)
-	Ins (Complete A, B, or both.) Ing contributions and electronic bank transfers will not be available for withdrawal for seven business days.
	curring contributions (also known as automatic investment plan or AIP). Have a set amount electronically transferred from r bank account to your College Savings lowa account on a regular schedule.
	Add this option to my account. (Provide your debit information at the top of the next page and your bank information in Section 3 .)
	Change my investment amount, debit date, or both. (Provide the new information on the next page.)
	Change my bank account information. (Provide the new information in Section 3 .)
	Discontinue recurring contributions.

REMEMBER TO SIGN IN SECTION 4.



Amount of Debi	t (ψ23 miniminum)): \$							
Frequency (Chec	ck one.):	Monthly [Quarterly						
Start Date:]/ [Date (month, da)	y, year)		unless you to your Coll contribution made in the	account will be debit pick a different date ege Savings Iowa and as with a debit date an new calendar year ad, not on a calenda	Your investment account on the <i>pre</i> of January 1st, 2r Quarterly investr	t will be credited evious business on nd, 3rd, or 4th w	d (money will l day. Note: Red vill be treated a	be added) curring as having bee
		u may increase the information	, ,	ontribution auto	omatically on an a	annual basis. Y	our contributi	on will be a	djusted
Note: A	olan of regular	r investment car	nnot ensure a pr	rofit or protect a	against a loss in a	a declining mar	rket.		
Amount of	f Increase:	\$. 00						
Month*:	*The month	in which your recu	rring contribution v	will be increased.	The first increase w	ill occur at the firs	st instance of th	e month selec	eted.
R Flootronic ha	nk transfer	(EBT). Make or	netime or period	lic transfers of	\$25 or more from	vour bank acc	count to your (
account by pho the New York S receive the nex	ne or online. T Stock Exchang t business day	he number of de (generally 4 p. /s trade date. T	ays the transfer .m., Eastern time	takes depends e), you will get	on the timing of that day's closing ice for your accou	your request. I g price. Reques	sts processed	after marke	t close will
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account by pho the New York S receive the nex Add Bank Informa Complete this s information. Important: The	ne or online. To Stock Exchange t business day Change action only if the recurring coret is a member	The number of de (generally 4 p. /s trade date. The Delete syou are adding a tribution and Errof the Automa	ays the transfer .m., Eastern time o establish or cl the recurring co BT options can lead Clearing Ho	takes depends e), you will get hange this serv ntribution and/ be used only w use (ACH) netw	on the timing of that day's closing ice for your accou	your request. I g price. Reques unt, provide you your account or	sts processed ur bank inform r are changing k, savings and	after marke nation in Se g your bank a	t close will ction 3. account
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Note: The routing number is usually located in the bottom left corner of your checks. You can also ask your bank for the routing number.

4. Signature—YOU MUST SIGN BELOW

I certify that I have received and read the College Savings Iowa 529 Plan Program Description and Privacy Policies and understand the rules and regulations governing College Savings Iowa. I understand that all changes made on this form supersede all my previous electronic money transfer instructions.

If I have added or changed the recurring contribution or electronic bank transfer option, I authorize College Savings lowa and Ascensus Broker Dealer Services, Inc., upon telephone or online request, to secure payment of amounts invested by me, by initiating credit or debit entries to my account at the bank named in **Section 3**. I authorize the bank to accept any such credits or debits involving my account without responsibility for their correctness. I acknowledge that the origination of ACH transactions involving my account must comply with U.S. law. I further agree that College Savings lowa, Ascensus Broker Dealer Services, Inc., and any of their respective affiliates will not incur any loss, liability, cost, or expense for acting upon my request. I understand that this authorization may be terminated by me at any time by notifying College Savings lowa and Ascensus Broker Dealer Services, Inc., by telephone or in writing, and that the termination request will be effective as soon as College Savings lowa and Ascensus Broker Dealer Services, Inc., have had a reasonable amount of time to act upon it. I acknowledge that if a recurring or EBT contribution cannot be processed because the bank account on which it is drawn contains insufficient funds or incomplete or inaccurate information, the plan reserves the right to suspend processing of future recurring or EBT contributions. I certify that I have authority to transact on the bank account identified by me in **Section 3**.

>			/	/	
	Signature of Participant	Date (mont	h, day, year)		

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