

Automatic Investment Plan Form

CollegeCountsSM
Alabama's 529 Fund
ADVISOR PLAN

PO Box 85290
Lincoln, NE 68501-5290
CollegeCounts529advisor.com

- Set up an automatic investment plan online at CollegeCounts529advisor.com.
– or –
- Complete this form to set up an automatic investment plan.
- An automatic investment plan (AIP) allows automatic investments from your bank account into a CollegeCounts 529 Fund Account. You can choose the dates for your automatic investment to be weekly, twice a month, monthly, quarterly, or annually.
- Please complete and return this form to:

Regular Mail:

CollegeCounts 529 Fund
PO Box 85290
Lincoln, NE 68501-5290

Overnight Mail:

CollegeCounts 529 Fund
6811 S. 27th Street
Lincoln, NE 68512

- **For assistance, call toll-free:** 866.529.2228 or contact your financial advisor.

1 CollegeCounts 529 Fund Account Information

Account Number

Account Owner's Social Security Number

Account Owner's First Name

M.I.

Last Name

Phone

Designated Beneficiary's First Name

M.I.

Last Name

2 Bank Account Information

To establish an automatic investment plan and to allow for the transfer of funds from an account at your financial institution to your CollegeCounts 529 Fund Account, please complete this section with your bank account information.

Account Type: ☐ Checking ☐ Savings

YOUR NAME	123
TAPE YOUR PREPRINTED VOIDED CHECK OR SAVINGS ACCOUNT DEPOSIT SLIP HERE.	
PAY TO THE	12 - 34
\$ _____	
DOLLARS	
SAMPLE	
BANK NAME AND ADDRESS	
MEMO	
:123456789:	34568:
VOID	

Questions? Please call toll-free 866.529.2228.

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Amount and Frequency of Transactions (Must Complete Entire Section)

Please choose the dollar amount you would like to invest each transaction, the transaction date(s), and the frequency for your automatic investments.

1. I would like to invest \$, .
2. Transactions should begin on the following date: - -
3. Frequency of the automatic transactions:

Frequency: (check one) **Timing:**

- ☐ Weekly Day of the Week (circle one): Monday Tuesday Wednesday Thursday Friday
- ☐ Twice a Month Days of Month: _____ & _____ (If not provided, the transfers will occur on the 7th & 21st of the month.)
- ☐ Monthly Day of Month: _____ (If not provided, the transfer will occur on the 17th of the month.)
- ☐ Quarterly Day of the Month (i.e., 1-31): _____
- Check One:** ☐ JAN, APR, JUL, OCT ☐ FEB, MAY, AUG, NOV ☐ MAR, JUN, SEP, DEC
- ☐ Annually Month _____ and Day of Month (i.e., 1-31) _____

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Authorization

I hereby authorize the Program Manager to initiate debit entries to the bank account indicated above, and the bank indicated above to debit the same amount. This authority is to remain in full force and effect until the Program Manager has received notification from me of its modification or termination in such time as to afford the Program Manager 10 business days to act on it. I understand that if a transaction cannot be made because of insufficient funds or because either account has been closed, this service will be canceled by the Program Manager. I acknowledge that the origination of ACH transactions to my account must comply with the provisions of applicable law. I further agree that if my draft is dishonored for any reason, with or without cause, the Program Manager will not bear any liability.

Union Bank & Trust Company may correct any transaction errors with a debit or credit to my financial institution account and/or my CollegeCounts 529 Fund Account.

Please allow approximately 10 business days for the first transfer. Please retain a copy of this authorization for your records.

X

Signature of CollegeCounts 529 Fund Account Owner

Date

X

Signature of Bank Account Owner (if different from above)*

Date

*Medallion Signature Guarantee is required if the name on the bank account is not the same as the CollegeCounts 529 Fund Account Owner.

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Medallion Signature Guarantee

A Medallion Signature Guarantee is required if:

- The bank account owner is different than the CollegeCounts 529 Fund Account Owner.

MEDALLION SIGNATURE GUARANTEE

Note to Guarantor:

Medallion imprints must be fully legible and must not be dated or annotated.

Signature must be stamped with a Medallion Signature Guarantee by a qualified financial institution, such as a commercial bank, savings and loan, U.S. stock broker and security dealer, or credit union, that is participating in an approved Medallion Signature Guarantee Program. (A NOTARY SEAL IS NOT ACCEPTABLE.)



Offered by the
State of Alabama

UBT 529 Services a Division of

UNION BANK
& TRUST COMPANY®

Program Manager

Questions? Please call toll-free 866.529.2228.

Jan 2012