



IRA Account Options Form

Use this form to add or update bank information, systematic purchase/exchange plan, or telephone privileges on your Invesco Traditional, Roth, SEP, SARSEP or SIMPLE IRA.

Do not use this form for requesting a systematic purchase plan for SIMPLE or SARSEP IRAs. Your employer must initiate and authorize the request on the Invesco Retirement Plan Systematic Contribution Form.

PLEASE USE BLUE OR BLACK INK

PLEASE PRINT CLEARLY IN BLOCK CAPITAL LETTERS

1 | IRA and Account Owner Information

SSN or TIN (Required)

Invesco Account Number or Plan ID

Account Registration (Please print name as it appears on account.)

Primary Phone Number

Email Address

2 | Bank Account Information

Please provide bank instructions in this section. In doing so, shareholders with eligible accounts are allowed to make investments into their fund by calling an Invesco Client Services representative. Upon request, Invesco Investment Services, Inc. (IIS) can arrange for a specified dollar amount to be deducted from your bank account via Automated Clearing House (ACH) and used to purchase shares of a specified fund. These bank instructions will also be used for systematic purchase and may receive redemption proceeds, as applicable.

Note:

- Unless instructed otherwise, IIS will replace your current systematic bank information with the new bank information provided.
- Notarized signature(s) of bank account owner(s) is required in Section 8 if different from the account registration.
- Temporary or starter checks are not acceptable.
- If a voided company or corporate check is provided, then a letter from that financial institution verifying the authorized signers must be included.

Keep existing bank information on file in addition to adding new bank information.

Account Type: Checking Savings

Name(s) on Bank Account

Pay to the order of _____ \$

Please tape your voided check here.

Routing Number

Account Number

3 | Telephone Transactions

Note:

- Telephone purchase option is not allowed on SIMPLE IRAs or SARSEP IRAs.
- To add telephone redemption to an existing account, a notary stamp is required in section 7.
- All proceeds will be mailed to the address of record unless bank information is provided in section 2.

Telephone Exchange Add telephone exchange Remove telephone exchange

Telephone Purchase Add telephone purchase Remove telephone purchase

Telephone Redemption Add telephone redemption Remove telephone redemption

4 | Systematic Purchase Plan (Attach voided check in section 2.)

The systematic purchase plan is a service available to shareholders making regular systematic purchases of shares to allow dollar-cost averaging. IIS must receive these instructions at least 10 business days prior to the first selected draft date.

I authorize IIS to withdraw the amount indicated in 4B (\$25 minimum per fund) from my bank account shown in section 2 and invest this amount in shares of the fund(s) listed in 4B. Furthermore, I understand and agree to the terms listed below.

- If the selected draft date has already passed, I am directing IIS to establish the plan for the next scheduled draft date.
- If I do not provide a draft date(s), I am directing IIS to draft on the 10th for monthly drafts or 10th and 25th for twice-monthly drafts.
- If I do not provide bank account information in section 2, I am directing IIS to use the bank information on record.

A. Frequency (Select one.)

- Monthly - One draft per month on the following day _____
- Twice-monthly - Two drafts per month on the following days _____ and _____
- Quarterly - One draft per quarter on the following day _____

Beginning on _____ (month) _____ (year).

B. Fund Selection (If you have additional funds, please attach a separate page including all of the information requested in this section.)

Fund Number	Fund Name	Class of Shares	Purchase Amount
		<input type="checkbox"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
		<input type="checkbox"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
		<input type="checkbox"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
		<input type="checkbox"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
		<input type="checkbox"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
		<input type="checkbox"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
		<input type="checkbox"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
		<input type="checkbox"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>
		<input type="checkbox"/>	\$ <input type="text"/> <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> <input type="text"/> . <input type="text"/> <input type="text"/>

7 | Authorization and Signatures (Please sign and date below.)

By signing this form, (i) I authorize and direct IIS to maintain the account referenced herein, **and (ii) I agree to indemnify and hold harmless IIS, its affiliates, each of their respective employees, officers, trustees, or directors, and each of the Invesco Funds from and against any and all claims, losses, liabilities, damages and expenses that may be incurred by reason of your actions taken in accordance with the instructions set forth herein.**

Signature (Required)	Title	Date (mm/dd/yyyy)
<input type="text" value="X"/>	<input type="text"/>	<input type="text"/>

Signature guarantee is required if you intend to send redemption proceeds to the new bank of record within the next 15 business days.

<p>Signature Guarantee: (Please place signature guarantee stamp below.)</p>	<p>Each signature must be guaranteed by a bank, broker-dealer, savings and loan association, credit union, national securities exchange or any other "eligible guarantor institution" as defined in rules adopted by the Securities and Exchange Commission. Signatures may also be guaranteed with a medallion stamp of the STAMP program or the NYSE Medallion Signature Program, provided that the amount of the transaction does not exceed the relevant surety coverage of the medallion. A signature guarantee may NOT be obtained through a notary public.</p>
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Note: Endorsement guarantee is not acceptable.

A notary stamp is required under the following circumstances:

- Adding the telephone redemption feature to an existing account.
- Adding bank instructions when the Invesco account owner is not listed in the bank account registration.

Important: If a signature guarantee was provided above, then a notarized signature is not required for the Invesco account owner.

Certification of Acknowledgement of Notary Public:

State of _____, in the County of _____ Subscribed and sworn before me by the above-named individual who is personally known to me or who has produced (type of identification) _____ as identification, that the foregoing statements were true and accurate and made of his/her own free act and deed, on (Date - mm/dd/yyyy) _____ .

Notary Public: _____

My Commission Expires: _____

Date (mm/dd/yyyy) _____

Notary Seal

8 | Notarized Signature of Bank Account Owner(s)

Note: Notarized signatures of bank account owner(s) is required if different from the Invesco account registration.

By signing this form and providing bank instructions, I understand and acknowledge that:

- IIS may debit my bank account for ACH drafts paid to the Invesco account.
- IIS may accept telephone or written instructions to remit proceeds to this bank account.
- This authorization will remain in full force and effect, and IIS may continue to honor instructions to draft this bank account until written notice is provided revoking this authority.

Signature of Bank Account Owner

Date (mm/dd/yyyy)

X _____

Certification of Acknowledgement of Notary Public:

State of _____, in the County of _____ Subscribed and sworn before me by the above-named individual who is personally known to me or who has produced (type of identification) _____ as identification, that the foregoing statements were true and accurate and made of his/her own free act and deed, on (Date - mm/dd/yyyy) _____ .

Notary Public: _____

My Commission Expires: _____

Date (mm/dd/yyyy) _____



Signature of Bank Account Owner

Date (mm/dd/yyyy)

X _____

Certification of Acknowledgement of Notary Public:

State of _____, in the County of _____ Subscribed and sworn before me by the above-named individual who is personally known to me or who has produced (type of identification) _____ as identification, that the foregoing statements were true and accurate and made of his/her own free act and deed, on (Date - mm/dd/yyyy) _____ .

Notary Public: _____

My Commission Expires: _____

Date (mm/dd/yyyy) _____



9 | Mailing Instructions

Please send completed and signed form to:

(Direct Mail)
 Invesco Investment Services, Inc.
 P.O. Box 219078
 Kansas City, MO 64121-9078

(Overnight Mail)
 Invesco Investment Services, Inc.
 c/o DST Systems, Inc.
 430 W. 7th Street
 Kansas City, MO 64105-1407

For additional assistance please contact an Invesco Client Services representative at 800 959 4246, weekdays, 7 a.m. to 6 p.m. Central Time.

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