

Automated Clearing House (ACH) Electronic Funds Transfer (EFT) Form for Plan Contributions

Please use this form to establish the ACH privilege that allows you to process plan contributions via EFT for 401(k), profit sharing, money purchase pension, SEP IRA or SIMPLE IRA retirement plans. Please mail the completed form to Columbia Management Investment Services Corp. (CMIS) at the address below. Within three weeks of CMIS receiving your form in proper order, you may initiate plan contributions. Plan contributions received before 4:00 p.m. ET will receive that day's price. Contributions received after 4:00 p.m. ET will receive the next business day's price. Funds will usually be withdrawn from your bank account within three business days after the receipt of your plan contribution(s). If you have any questions regarding this privilege, please call a retirement plan services representative at 800.799.7526.

Part 1 Plan Information

Plan Name	Plan ID
<input type="text"/>	<input type="text"/>
Employer Name	Tax Identification Number
<input type="text"/>	<input type="text"/>

Part 2 Bank Information

Please contact your bank to verify ACH EFT service is available.

Bank Account Number (Do not use spaces or dashes)	ABA Routing Number
<input type="text"/>	<input type="text"/>
Name of Bank Account Owner	Name of Joint Owner, if applicable
<input type="text"/>	<input type="text"/>

Account Type: ☐ Checking ☐ Savings **Please attach a blank check marked "Void" – (Deposit slips are not acceptable)**

Part 3 Signatures

By electing this option, I agree that neither the Columbia Funds, Columbia Management Investment Services Corp., the Custodian, nor any of their respective affiliates, officers, directors, agents and employees will be liable for any loss, injury, damage or expenses as a result of acting upon my instructions. I agree to hold Columbia Funds, Columbia Management Investment Services Corp., the Custodian and their respective affiliates, officers, directors, agents and employees harmless from any loss, claims or liability arising from their compliance with these instructions. I understand that this option is subject to the terms and conditions set forth in the prospectuses of the applicable funds.

Signature of Employer	Date (MM/DD/YYYY)	Print Name of Employer Signature
<input type="text" value="X"/>	<input type="text"/>	<input type="text"/>

Part 4 Return Instructions

[Reset Form](#)

Regular mail	Columbia Management Investment Services Corp. Attn: Retirement Plan Services P.O. Box 219104 Kansas City, MO 64121-9104	Overnight mail	Columbia Management Investment Services Corp. Attn: Retirement Plan Services 801 Pennsylvania Ave STE 219104 Kansas City, MO 64105-1307
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For assistance completing this form, please contact a representative at 800.799.7526, Monday through Friday, 8:00 a.m. to 5:00 p.m. Eastern time. Columbia Threadneedle Investments (Columbia Threadneedle) is the global brand name of the Columbia and Threadneedle group of companies. Columbia Management Investment Services Corp. is the transfer agent for Columbia Funds