

Client Name:

Fund Company Name:

Estimated Amount of Investment: \$

Estimated sales charge: \$ or %

Joint Client Name:

My Financial Professional recommended

did not recommend this Mutual Fund or 529 Plan to me.

MUTUAL FUND SHARE CLASS: Select the share class being purchased.

<u>Class A Shares</u>: have a front-end sales charge which may be reduced with large purchases. Typically, the internal operating expenses are less than other share classes.

Indicate if any of these options apply:

ROA (Rights of Accumulation): I [household] already own Class A shares within the same fund family and are eligible for a breakpoint at the \$______ level.

LOI (Letter of Intent): I [household] plan to make additional purchases within the required time frame as outlined in the prospectus to be eligible for a breakpoint at the \$______ level.

NAV (Net Asset Value): This investment qualifies for NAV transfer/purchase as defined in the fund prospectus.

<u>Class B Shares</u>: usually have no front-end sales charge but generally have a contingent deferred sales charge (CDSC) and higher internal operating expenses than class A shares. *Most fund companies no longer offer class B shares*.

<u>Class C Shares</u>: usually have no front-end sales charge but may charge a CDSC (typically in the first year) and higher internal operating expenses than other share classes. Typically, class C shares are used for a short time horizon. Most class C shares convert to a lower-cost share class after a specified number of years and do not offer discounts on expenses. In some 529 Plans, class C shares convert automatically to a lower-cost share class after a specified number of sales.

<u>Other Share Classes</u>: may be offered by fund companies, often to accommodate qualified (retirement) money. If an alternate share class is purchased, provide explanation:

SOURCE OF FUNDS: What is the source of funds used to purchase this Mutual Fund or 529 Plan?

Mutual Fund Switch◊*	Salary/Current Income		Savings/CD*	Gift/Inheritance	Direct Rollover
Business Revenue	Stock Redemption*		Sale of Assets	Transfer of Assets	
Annuity Surrender/Withdrawal** Insurance Surre		der/Withdrawal**	Legal/Insurance Settlem	ient	

◊If redeeming a Mutual Fund from a different Fund Company, be sure to complete the Mutual Fund Switch Letter.
*If selling Stock or surrendering an Annuity, CD or Life Insurance Policy, complete the information below & include a recent contract/account statement.

*I understand that redeeming Mutual Funds, CD or Fixed Annuities prior to maturity may incur charges or penalties.

***I understand that redeeming Insurance Policy or Annuity may incur a surrender charge and the contract's death or living benefits cannot be reinstated.

Policy/Contract/Account #	Policy/Contract/Account Value (\$)
Company/Fund Name	Surrender Charges (\$)

Securities and Investment Advice offered through Investment Planners, Inc. (Member FINRA/SIPC) and IPI Wealth Management, Inc., respectively. 226 West Eldorado Street, Decatur, IL 62522.



529 PLAN: Complete this section if investing in a 529 Plan.

Name & State of 529 Plan:							
State of Owner's Residence:							
The 529 Plan selected is:	E	Brokerage		Advisory			
Primary Use of funds:	K-5	6-8	9-12	Post-Secondary Education	529 ABLE		

Note: Any remaining balance after Primary Use indicated above may be used to fund additional educational expenses or transferred per 529 Plan guidelines.

Please read and acknowledge the statements below with initials:

I received a copy of the prospectus from my Financial Professional on _____ (date).

I have reviewed and understand the state tax treatments of the chosen Plan, and if the Plan is not associated with my resident State, I understand the tax implications involved. Some plans offer age-based or objective-based portfolios rather than share classes and are directly associated with the beneficiary of your Plan, as detailed in the prospectus. If investing in a non-resident state 529 Plan, provide explanation:

I understand that IPI uses the industry standard of age 18 of the beneficiary for which the funds will be necessary for college. If the funds are intended for another purpose or you are using a different age, provide explanation:



DISCLOSURES: Please read carefully.

Value of Shares/Fluctuating Yield – The value of my shares or units may increase or decrease. Upon redemption, I may receive more or less than paid. Dividends or interest may also fluctuate, and the amount is not guaranteed. Past performance is no guarantee of future results. I understand that dollar-cost averaging does not assure a profit and does not protect against loss in a declining market.

Adequate Information – I have received and read the current prospectus, memorandum, or other required document(s) explaining the investment(s).

Risks – I understand this investment requires a minimum time commitment to remain invested. The more aggressive my investment, the longer my/our time horizon should be as indicated on the IPI Account Form.

Suitability – I meet any additional suitability requirements of this investment and have the financial capabilities as described in the offering documents to make this investment.

Costs – I have been informed of, and understand, the details, including costs of the investment product as described in the offering or other documents.

Management Responsibility – IPI does not sponsor or manage investment, insurance or alternative investment products. The performance of your investment will depend upon results achieved by the fund manager, general partners or insurance company.

Breakpoint – I understand that if I invest all the investment dollars into the same mutual fund family, I may receive a reduced sales charge. However, if I want diversification among fund families and/or managers, I will forego the reduced sales charge to receive it.

ACKNOWLEDGEMENT & SIGNATURES: All parties must sign

- By signing below, I understand that due to the nature of this investment additional documentation may be required before my investment takes effect.
- My signature reflects acknowledgement to the pre-dispute arbitration clause described in the accompanying IPI Account Form, and that this application, account(s) and transaction(s) contemplated are subject to such arbitration clause.
- I have received and reviewed the Form CRS and Regulation Best Interest Disclosure and understand the terms therein.
- By signing below, I certify that I received, read, and agree to the terms of the Prospectus or Offering Document for the product(s).
- I confirm that the information provided in this document is complete and accurate to the best of my knowledge as of the date indicated below.
- I have read, understand, and agree to the above Disclosures section.
- I understand the nature of this investment and still wish to invest.

Primary Account Owner/Trustee Signature	Date	Print Name of Primary Account Owner/Trustee							
Joint Owner/Co-Trustee/Associated Client Signature	Date	Print Name of Joint Owner/Co-Trustee/As	ssociated Client						
Financial Professional acknowledgment: I have acted in the best interest of my client by reviewing all points in the above disclosure and supporting information provided in the prospectus or offering document. To the best of my knowledge,									
the information provided is complete and accurate.									
Financial Professional Signature	Date	Firm Principal Signature	Date						