

Return Completed Form to: Sterling Capital Funds P.O. Box 9762 Providence, RI 02940-9762 For assistance, call (800) 228-1872

AUTOMATIC INVESTMENT PLAN FORM							
Please use this form to add or change Automa	atic Investment Plar	n instructions to your	pre-existing Sterling Capital Funds	account.			
ACCOUNT OWNER:							
JOINT OWNER (IF APPLICABLE): _							
ADDRESS:		CITY	OTATE	710			
STREET ADDRESS	(ЛІТ	STATE	ZIP			
ACCOUNT NUMBER:							
Please check one:	king Instructions	or	☐ Change Current Banking Inst	tructions			
 If establishing a new systematic investment into a new fund, please include a check in the amount of \$25.00 for the initial payment as the bank account is unable to be drafted for the initial deposit. Minimum automatic investment is \$25.00 per fund. All retirement account contributions invested using the Automatic Investment Plan will be current year contributions. We will establish your banking instructions using the voided check attached in the space provided below. If the investment date falls on a day the NYSE is not open for business, the investment date will occur on the next day the NYSE is open for business. 							
I would like to automatically invest from my * If you not indicate a frequency, then we will c		ny Sterling Capital	Funds account on the following ba	asis:			
☐ Weekly ☐ Bi-Monthly	☐ Monthly	☐ Quarterly	☐ Semi-Annually	☐ Annually			
Beginning in the month of, the in * If you do not indicate a date of the month, the	vestment(s) marke en we will default to	ed below will take pother the 15 th of the mon	place on the following day(s) th.	and			
Please debit the below amount(s) from my:	☐ Checki	ng Account	or Savings Account				
Fund Name	Select a S	Share Class (requi C	ired)				
Behavioral Large Cap Value Equity Fund Mid Value Fund Behavioral Small Cap Value Equity Fund Special Opportunities Fund Equity Income Fund Behavioral International Equity Fund Stratton Mid Cap Value Fund Stratton Mid Cap Value Fund Stratton Small Cap Value Fund Stratton Small Cap Value Fund SMID Opportunities Fund Ultra Short Bond Fund Short Duration Bond Fund Intermediate U.S. Government Fund Total Return Bond Fund Kentucky Intermediate Tax Free Fund Maryland Intermediate Tax Free Fund North Carolina Intermediate Tax Free Fund South Carolina Intermediate Tax Free Fund Virginia Intermediate Tax Free Fund Sterling Capital Deposit Account Strategic Allocation Balanced Fund Strategic Allocation Growth Fund Diversified Income Fund Quality Income Fund Other	☐ (012) ☐ (015) ☐ (021) ☐ (022) ☐ (025) ☐ (026) ☐ (027) ☐ (028) ☐ (064) ☐ (039) ☐ (040) ☐ (041) ☐ (042) ☐ (043) ☐ (044) ☐ (045)						
		Total \$					

Attach a voided check in the space provided below.					
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	ATTA	CH VOIDEI	O CHECK HERE		
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Note:					
		ays to enable this feat			
At least one of	rtne names on yo	our check must match	the name(s) on your account.		
I authorize the abo		vestment(s) to be made	le on my Sterling Capital Funds accou	unt utilizing the bank account	
Signature of Accou	unt Owner	 Date	Signature of Joint Own	er (If applicable) Date	