



P.O. Box 659453  
San Antonio, Texas 78265-9825

# Mutual Fund Automatic Investment Plan by Recurring ACH Debit

**STEP 1:** Complete the following information to establish a monthly recurring investment to your USAA Mutual Fund(s) from your financial institution.

**STEP 2:** Complete and sign and return to USAA. Keep a copy for your records. Allow five business days for processing.

Minimum automatic investments are generally \$50 per transaction per USAA Mutual Fund(s). Consult each fund prospectus for details regarding investment minimums.

## Personal Information

USAA Number

Name(s) as they appear on your account(s)

## Type of Request (Select One)

☐ Establish a new plan    ☐ Change an existing plan    ☐ Cancel an existing plan

## Mutual Fund Accounts for Automatic Investment

Mutual Fund Account Number

Automatic Investment Amount

Monthly Draft Date

Mutual Fund Account Number

Automatic Investment Amount

Monthly Draft Date

Mutual Fund Account Number

Automatic Investment Amount

Monthly Draft Date

When would you like this plan to begin? \_\_\_\_\_  
(mm/dd/yy)

**Note:** If draft date is not specified, your financial institution account indicated below will be debited on the 15th of each month. Draft date will be the prior business day depending on market availability (when stock market is open).

## Banking Information

You **must** be an owner of the account at the other financial institution. You will need to attach a voided check, deposit slip, or financial institution statement with the account number and all owner names preprinted on it.

☐ Checking    ☐ Savings

Name of Financial Institution

Name of Account Owner(s)

Type of Account

Transit Routing Number (The nine-digit number in lower left corner of check)

Account Number

**Account number and all owner names must be preprinted and unaltered.**

Dana Jones  
123 Main Street  
Anytown, NY 12345

20 803

**REQUIRED**

Pay to the order of \_\_\_\_\_ \$ \_\_\_\_\_

**Tape your voided check or preprinted deposit slip here.**

National Bank  
Delaware

321070010 803123456789

VOID

ABA Transit Routing Number    Account Number

## Read and Sign

I authorize USAA Shareholder Account Services (SAS) to debit my account at the financial institution as forth above. If the amount set forth above is between \$20 and \$500, I authorize USAA SAS to accept my instructions, whether in writing, by telephone, or on usaa.com, to change the amount, frequency, and date of the recurring debit. If the amount of the debit exceeds \$500, USAA SAS will provide a written confirmation of the change to the recurring debit at least 10 days before the effective date of the changed debit amount, date of the recurring debit, or frequency. I also authorize the financial institution named above to accept electronic debit advice to my account and to reverse, if necessary, any withdrawals from my account made in error. I agree that automated credit entries to my USAA mutual fund account and debits from my account at the financial institution named above will constitute receipt and acceptance of the transaction.

The authority provided in this document will remain in effect until I notify USAA SAS to terminate the authority and give USAA SAS reasonable opportunity to act on the notice of termination. If I instruct USAA SAS to change the amount, frequency or date of the electronic debit, I waive the right to receive notice of the change if the amount of the debit is no less than \$20 and no more than \$500. I understand USAA SAS may terminate the EFT instructions from my account(s) at any time in its sole discretion. I acknowledge that the origination of ACH transactions to my account must comply with U.S. law.

**X**

Signature of USAA Account Owner, Trustee or Custodian

Date (mm/dd/yyyy)

**X**

Signature of USAA Joint Account Owner or Co-Trustee

Date (mm/dd/yyyy)