

Web Access Enrollment Sheet

All new and existing online access users must complete this form. Please complete all fields, then fax or mail the completed sheet to the number/address listed below. Your User ID will be e-mailed to you within a week of submission.

You can either print out the Enrollment Sheet and fill it out by hand or click on the lines and fill it out the same way you would a web form. Thank You.

Type of investor:

Trust, Corporation, Business or Other Entity

Name of Corporation, Trust, Financial Institution or Other Entity: _____

Authorized Signer/Trustee:

First Name: _____ Middle Initial: _____ Last Name: _____

Individual

First Name: _____ Middle Initial: _____ Last Name: _____

Email Address: _____ Password for account: _____
(must be at least 6 characters; containing at least one number)

Phone Number (xxx-xxx-xxxx): _____ Date of Birth (dd/mm/yy): _____

To gain access to your account information, you must first "link" your account(s) by providing the information indicated below.

If you own multiple funds under a common Account and SSN/Tax ID number, it is only necessary to enter that information once.

You may also link other accounts as long as you can provide a valid SSN/Tax ID and Account Number.

Link accounts

Tax ID: _____ Account Number: _____

Tax ID: _____ Account Number: _____

Tax ID: _____ Account Number: _____

Tax ID: _____ Account Number: _____

Tax ID: _____ Account Number: _____

Tax ID: _____ Account Number: _____

ONCE COMPLETED, PLEASE FAX TO: 312-557-0411

OR MAIL TO: Asset Management Fund
P.O. Box 803046
Chicago, IL 60680-4594

SHAY