

AUTOMATIC INVESTMENT PLAN (AIP)

3. Bank Information

Check this box if you wish to use bank instructions already on file for your account. Otherwise, provide the information below to add new bank instructions to your account.

Bank Name _____

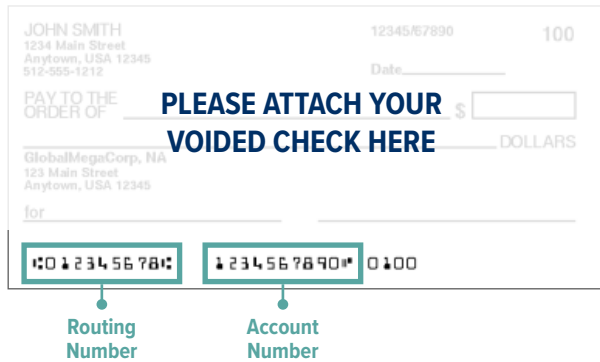
Bank Address _____ City _____ State _____ ZIP _____

Name(s) on Bank Account _____

Bank Account Number _____ Bank Routing Number _____

Type of Account

- Checking Account
- Savings Account



4. Signature

- I authorize credits/debits to/from the bank account referenced. I agree that Weitz Funds will be fully protected in honoring any such transaction. I also agree that Weitz Funds may make additional attempts to credit/debit my account if the initial attempt fails and that I will be liable for the associated costs.
- This authority will remain in effect until I notify Weitz Funds to cancel. I can stop or change the dollar amount of this automatic service by notifying Weitz Funds three (3) business days before my bank account is charged.
- If this document is signed electronically, I consent to be legally bound by this document and subsequent terms governing it. The electronic copy of this document should be considered equivalent to a printed form in that it is the true, complete, valid, authentic and enforceable record of the document, admissible in judicial or administrative proceedings. I agree not to contest the admissibility or enforceability of the electronically stored copy of this document. Note that this document may not be signed using Adobe Acrobat Reader's "fill and sign" feature.

X _____
Signature of Owner/Authorized Signer _____ Date _____

X _____
Signature of Owner/Authorized Signer _____ Date _____

X _____
Signature of Owner/Authorized Signer _____ Date _____

X _____
Signature of Owner/Authorized Signer _____ Date _____