

# AUTOMATIC INVESTMENT SERVICE



**Mailing Address**  
Weitz Funds  
P.O. Box 219320  
Kansas City, MO 64121-9320

**Overnight Mailing Address**  
Weitz Funds  
c/o Boston Financial Data Services  
330 W. 9th St.  
Kansas City, MO 64105-1514

**Phone**  
(800) 304-9745  
**Fax**  
(402) 391-2125  
**Email**  
clientservices@weitzinvestments.com

## 1. WEITZ FUNDS FUND/ACCOUNT NUMBER

\_\_\_\_\_ Fund Account \_\_\_\_\_

- This is a new request for automatic investment service.
- This is an update to existing automatic investment service.
- This is an addition to existing automatic investment service.

## 2. BANK INFORMATION

Bank Name \_\_\_\_\_ Bank Account Number \_\_\_\_\_

Bank Address \_\_\_\_\_ Bank Account Title \_\_\_\_\_

Bank Routing Number \_\_\_\_\_ Bank Account Type  Checking  Savings  
(Nine digit number) Please attach a voided check or savings deposit slip for this bank account.

## 3. AUTOMATIC INVESTMENT BY ACH

*Automatic investment purchases made to IRA accounts will be designated as a contribution for the tax year in which the purchase was made.*

FUND	AMOUNT	1 <sup>st</sup>	8 <sup>th</sup>	15 <sup>th</sup>	22 <sup>nd</sup>	FREQUENCY				Beginning (Month/Year)
						Monthly	Quarterly	Semi-Annually	Annually	
Value Fund/(WVALX) & (WVAIX)/328 & 541	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ / _____
Partners Value Fund/(WPVLX) & (WPVIX)/331 & 562	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ / _____
Partners III Opportunity Fund (WPOPX) & (WPOIX)/310 & 436	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ / _____
Hickory Fund/(WEHIX)/332	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ / _____
Balanced Fund/(WBALX) & (WBAIX)/400 & 5400	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ / _____
Short Duration Income Fund/(WEFIX) & (WSHIX)/329 & 437	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ / _____
Core Plus Income Fund/(WCPBX) & (WCPNX)/573 & 574	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ / _____
Nebraska Tax-Free Income Fund/(WNTFX)/311	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ / _____
Ultra Short Government Fund/(SAFEX)/3330	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	_____ / _____

I authorize Weitz Funds and the bank named in the Bank Information section to initiate entries to my account (\$25 minimum per purchase). I further authorize such entries to my account, per these instructions, as may be necessary to adjust any entries that were previously initiated. I authorize the bank to accept and to debit the amount of such entries to my account.

This authority will remain in effect until I notify you to cancel. I can stop or change the dollar amount of this automatic service by notifying you three (3) business days before my account is charged. Changes to bank information require fifteen (15) days notice.

If any weekends or holidays occur on these days, the investment will be processed on the next business day. ACH processing takes approximately two (2) business days to complete.

## 4. ACCOUNT OWNER SIGNATURE(S) (All owners must sign)

\_\_\_\_\_ Account Owner

\_\_\_\_\_ Account Owner

\_\_\_\_\_ Account Owner

\_\_\_\_\_ Account Owner