



IRA Add Account Details

Use this form to add exchange or redemption
to your account after it has been established.

Mail to:
Buffalo Funds
c/o U.S. Bank Global Fund Services
PO Box 219252
Kansas City, MO 64121-9252

Overnight Express Mail To:
Buffalo Funds
c/o U.S. Bank Global Fund Services
801 Pennsylvania Ave Suite 219252
Kansas City, MO 64105-1307

For additional information please call toll-free 1-800-492-8332 or visit us on the web at www.buffalofunds.com.

Directions: Please complete Section 1 and any of the other section(s) of your choice. Use one form per account. Also, please note that some sections require a signature authentication.

1 Investor Information

NAME(S) ON YOUR BUFFALO ACCOUNT

BUFFALO ACCOUNT NUMBER

2 Telephone and Internet Options

Selecting these options allows us to accept your instructions via telephone. You may also perform these functions by logging into your account at www.buffalofunds.com (IRA and CESA redemption available via telephone only)

Your signed Application must be received at least 15 business days prior to initial transaction.

Redemption – permits the transfer of funds via:

- ☐ Check to address of record
- ☐ Federal wire to your bank account below (there is a \$15 charge for each wire [fee subject to change])*
- ☐ Electronic Funds Transfer (EFT), at no charge, to your bank below (funds are typically credited within two business days after redemption)*
- ☐ **Exchange** \$1,000 minimum – permits the exchange of shares between identically registered accounts.

E-mail Address – permits the Fund to send you Fund updates _____.

*The selection of these options requires a signature authentication. See the Signature Section for more details.

3 Voided Check for Bank Information

If you have selected wire redemptions or EFT redemptions, a voided bank check or preprinted savings deposit slip (not a counter deposit slip) is required.

We are unable to debit or credit mutual fund or pass-through accounts.

Please contact your financial institution to determine if it participates in the Automated Clearing House system (ACH).

John Doe Jane Doe 123 Main St. Anytown, USA 12345		53289
Pay to the order of _____		\$ _____
_____		DOLLARS
Memo _____	Signed _____	
⑆ 1 2 3 4 5 6 7 8 9 ⑆ ⑆ 1 2 3 4 5 6 7 8 9 ⑆		

4 Signature

I (we) request that the options selected be added to my (our) account(s). I understand the Funds' investment objectives and policies and agree to be bound by the terms of the prospectus. Before I request an exchange, I will obtain the current prospectus for each Fund. I certify that I am of legal age and have legal capacity to make this request.

The Funds, the applicable Fund, its transfer agent, and any officers, directors, employees, or agents of these entities (collectively "Buffalo Funds") will not be responsible for banking system delays beyond their control. By completing sections 2 and 3, I authorize my bank to honor all entries to my bank account initiated through U.S. Bank, N.A., on behalf of the applicable Fund. The Buffalo Funds will not be liable for acting upon instruction believed to be genuine and in accordance with the procedures described in the prospectus or the rules of the Automated Clearing House. I agree that my bank's treatment and rights to respect each entry shall be the same as if it were signed by me personally. I agree that if any such entries are dishonored with good or sufficient cause, my bank shall be under no liability whatsoever. I further agree that any such authorization, unless previously terminated by my bank in writing, is to remain in effect until the Funds' transfer agent receives and has had a reasonable amount of time to act upon a written notice of revocation. I authorize U.S. Bank Global Fund Services to obtain a third party report for the purposes of authenticating the bank information that I provided.

X

SIGNATURE OF OWNER*

DATE (MM/DD/YYYY)

X

SIGNATURE OF OWNER*

DATE (MM/DD/YYYY)

*If shares are registered in a custodian for a minor, the custodian should sign

If required, A signature guarantee or a signature validation may be obtained from an officer of a bank, savings association, credit union, a member firm of a domestic stock exchange, or the Financial Industry Regulatory Authority, that is an eligible guarantor institution. A notary public from a financial institution is able to provide an acceptable guarantee. The notary public's business card or a signed letter from the notary public on the financial institution's letterhead must accompany the form.

We suggest you contact your financial institution to verify the documentation required to obtain a signature guarantee or notary stamp for your specific situation.

SIGNATURE GUARANTEE/SIGNATURE VALIDATION/NOTARY STAMP

5 Bank Account Owner Signature(s) and Signature Guarantee (see Voided Check for Bank Information)

If the bank information provided in the Bank Information section does not list a registered account owner, trustee, or authorized signer as a bank account owner, ALL bank account owners must sign below and obtain a signature guarantee.

X

SIGNATURE OF BANK ACCOUNT OWNER

X

SIGNATURE OF BANK ACCOUNT OWNER

We suggest you contact your financial institution to verify the documentation required to obtain a signature guarantee for your specific situation.

SIGNATURE GUARANTEE