

Iman Fund

Automatic Investment Plan Application

Instructions: Forward completed Application

- (1) by mail to: Iman Fund, c/o U.S. Bancorp Fund Services, LLC, P.O. Box 701, Milwaukee, WI 53201-0701 or;
(2) by overnight mail to: Iman Fund, c/o U.S. Bancorp Fund Services, LLC, 615 E. Michigan St., 3rd Floor, Milwaukee, WI 53202-5207.

For additional information, please call toll-free 1-888-FUNDS-85 or visit us on the web at www.investaaa.com.

Instructions

Instructions and Conditions

- Your signed Automatic Investment Plan (AIP) Application must be received at least 15 business days prior to your initial transaction.
- Your Iman Fund account must be established at the minimum initial investment level (\$100.00) before this Automatic Investment Plan goes into effect. To establish a new account with automatic investment plan features, you must complete a Purchase Application. (The AIP option is on the Application.)
- If the automatic purchase cannot be made due to insufficient funds or stop payment, a \$25 fee will be assessed.
- The Plan will be terminated upon redemption or exchange of all shares.
- An unsigned voided check (for checking accounts) or a savings account deposit slip is required with your application.

A. Investor Information

FUND NAME

FUND ACCOUNT NUMBER

NAME(S) ON ACCOUNT

ADDRESS

CITY/STATE/ZIP

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DAYTIME PHONE NUMBER

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EVENING PHONE NUMBER

B. Investment Instructions

Please start my Automatic Investment Plan as described in the Prospectus beginning on _____ (please give month, day, and year). I hereby instruct U.S. Bancorp Fund Services, LLC, Transfer Agent for the Iman Fund, to automatically transfer \$ _____ (minimum \$50.00) directly from my checking or savings account named below on the same day of each month (according to the date given above) or on the first business day thereafter.

C. Attach a voided check or savings deposit slip

Please attach a voided check or a preprinted savings deposit slip to this application. We are unable to debit mutual fund or pass-through ("for further credit") accounts. Please contact your financial institution to determine if it participates in the Automated Clearing House system (ACH).

**ATTACH VOIDED CHECK OR
PREPRINTED SAVINGS DEPOSIT
SLIP HERE**

D. Certification and Signatures

I have read and understand the conditions of the Automatic Investment Plan Account. I authorize you to honor all debit entries via the ACH Network initiated through U.S. Bank, N.A. on behalf of U.S. Bancorp Fund Services, LLC. All such debits are subject to sufficient collected funds in my account to pay the debit when presented. I also understand that this plan may be terminated or modified at any time by Iman Fund.

SIGNATURE OF OWNER(S)

DATE

DATE