

# Deposit Form

Please print neatly in blue or black ink.

If you have a question about your deposit form, call us at **1-800-258-3030**.

Make all checks payable to Homestead Funds and mail to:

## REGULAR MAIL

Homestead Funds  
c/o BFDS  
P.O. Box 219486  
Kansas City, MO 64121-9486

## OVERNIGHT MAIL

Homestead Funds  
c/o BFDS  
330 W. 9th Street, 1st Floor  
Kansas City, MO 64105-1514  
Attn: Shareholder Services

 **Be sure to sign your completed form (section 4).**

## 1. Personal Information

First Name	Middle Initial	Last Name
Social Security Number		Phone Number
If an Entity, Entity Name		Entity Tax Identification Number

## 2. Contributions

Please include your account number and, if contributing to an IRA or Coverdell ESA, the tax year of the contribution on the memo section of your check. If no tax year is indicated, your contribution will be reported as a current-year contribution.

Account Number	
Amount	Tax Year if Contributing to an IRA or Coverdell ESA

**Account type.** Check one:

- Traditional IRA
- Roth IRA
- Coverdell ESA
- Regular Account
- UGMA/UTMA

### 3. Select Your Funds

Indicate how the amount on the first page should be allocated by fund.

Fund Name	Account Number	Investment Allocation			
Daily Income (168) .....	_____	\$ _____	or	_____ %	
Short-Term Gov. (170).....	_____	\$ _____	or	_____ %	
Short-Term Bond (172) .....	_____	\$ _____	or	_____ %	
Stock Index (174).....	_____	\$ _____	or	_____ %	
Value (176) .....	_____	\$ _____	or	_____ %	
Small-Company (178) .....	_____	\$ _____	or	_____ %	
International Value (180).....	_____	\$ _____	or	_____ %	
Growth (182).....	_____	\$ _____	or	_____ %	
		<b>Total .....</b>	<b>\$ _____</b>	<b>or</b>	<b>100%</b>

 **Be sure to sign this form. We cannot act on your instructions without your signature.**

### 4. Signature

By my signature below, I certify that the information and instructions provided, and the elections made by and through this Deposit Slip, are true and correct. Homestead Funds may justifiably rely upon the instructions and elections made herein and is authorized to deposit the funds in the manner provided by this Deposit Slip.

▶ **X** \_\_\_\_\_  
Signature of Account Owner Date

**OR**

▶ **X** \_\_\_\_\_  
Signature of Depositor Date

I certify that I am legally able to make deposits for the owner's benefit.