

The Elite Group - Automatic Investment Plan Application

Name on account (please print) _____

Please start my Automatic Investment Plan by investing \$_____ each month

My Elite Fund account number is _____ (leave blank if new client.)

Deduct this amount from my bank account:

Please allocate this money into:

___ on the 10th of each month

___ The Elite Income Fund (Bonds) %___

___ on the 15th of each month

___ The Elite Growth & Income Fund (Stocks) %___

___ on the 25th of each month

Bank Name

Bank account number

Bank routing number

I understand that my ACH debit will be dated on the day of each month as indicated above or as specified by written request. I agree that if such debit is not honored upon presentation, PFPC Services, Inc. may discontinue this service and any share purchase made upon deposit of such debit maybe cancelled. I further agree that if the net asset value of the shares purchased with such debit is less than when the purchase was made, PFPC Services, Inc. shall be authorized to liquidate other shares or fractions thereof held in my account to make up the deficiency. This Automatic Investment Plan may be discontinued by PFPC Services, Inc. upon 30 days written notice or the investor by written notice to PFPC Services, Inc. which is received not later than 5 business days prior to the above designed investment date. I agree that your rights to each such debit shall be the same as if it were a check drawn upon you and signed personally by me. This authority shall remain in effect until you receive written notice from me, changing its terms or revoking it. Until you receive such notice, I agree that you shall be fully protected in honoring any such debit. I further agree that if any debit is dishonored, whether with or without cause, whether intentionally or inadvertently, you shall be under no liability whatsoever.

Signature (as shown on bank records)

Date:

To the bank named above: So that you may comply with your depositor's request and authorization, The Elite Group of Mutual Funds agrees of a debit drawn by PFPC Services, Inc. to the order of the Elite Income Fund or the Elite Growth and Income Fund designated on the account of your depositor(s) executing the authorization, including any costs or expenses reasonably incurred in connection with such loss. The Elite Group of Mutual Funds will not, however, indemnify you against any loss due to your payment of any debit generated against insufficient funds. 2) To refund to you any amount erroneously paid by you to PFPC Services, Inc. on any such debit if claim for the amount of such erroneous payment is made by you within 3 months of the date of such debit on which erroneous payment was made.

Attach a voided check or voided deposit slip

Mail Completed form to : The Elite Group, 1325 4th Ave., Suite 2144, Seattle, WA 98101

