

AIM 403(b)(7) Distribution Form

Use this form to request a distribution from your AIM 403(b)(7) account

- Please complete and return to Invesco Aim Investment Services, Inc. (IAIS). See last page for mailing instructions.



PLEASE USE BLUE OR BLACK INK

PLEASE PRINT CLEARLY IN BLOCK CAPITAL LETTERS

1 Employee Information

Social Security Number (Exactly as it appears on account.)

Existing Invesco Aim Account Number or Plan ID

Account Registration (Please print name as it appears on account)

Daytime Phone Number

Evening Phone Number

Date of Birth (mm/dd/yyyy)

2 Employer Information

Plan Name

3 Triggering Event

We recommend that you speak with a tax or financial advisor regarding the consequences of this distribution. A distribution cannot be made from a 403(b)(7) account except for the following reasons. (Check one.)

IMPORTANT NOTE - Effective 1/1/2009 all distributions will require an Employer signature in Section 12, except for a required minimum distribution, distribution due to death, or qualified domestic relations order.

- Normal** - Employee has reached age 59½ but is not yet taking required minimum distributions.
- Severance from Employment/Early Distribution, No Known Exception** - Employee has had a severance from employment with the employer who sponsors the plan.
Note: You may rollover your account to an IRA or an employer-sponsored retirement plan without incurring any tax liability, provided the distribution is otherwise eligible for rollover (e.g. not an installment distribution over a period of more than ten years; not the portion representing a required minimum distribution after age 70½.) If you are under age 55 and you take distributions from your account, and if the distributions are not rolled over, such distributions will be taxed as ordinary income and you may incur a 10% early distribution penalty.
- Severance from Employment/Early Distribution, Exception Applies** - Employee has had a severance from employment with the employer who sponsors the plan and has reached age 55.
Note: if you have reached age 55, distributions from your account if not rolled over, will be taxed as ordinary income and not incur an early distribution penalty.
- Required Minimum Distribution** - Employee has reached the age of 70½ and is taking required minimum distributions. (Go to Section 5.)
- Financial Hardship** - The Employee has encountered a financial hardship.
Note: Financial hardship shall be determined by the Employee, (Effective January 1, 2009, IAIS may request that the Employer certify factual information within its knowledge to confirm the existence of the Employee's financial hardship.) Hardship withdrawals shall be permitted only if the Employee has first made all available withdrawals and loans from all plans of the Employer and plans of entities related to the Employer in which he or she is a participant. To establish financial hardship, the Employee must demonstrate an immediate and heavy financial need, and the amount allowable as a hardship withdrawal shall not exceed the amount required to meet the immediate and heavy financial need which is not reasonably available from other resources of the Employee. Invesco Aim will report these distributions as a code 1 (early distributions) on the Form 1099-R. The Employee is responsible for filing a Form 5329 with the IRS to report such distributions in order to avoid the 10% penalty.
- Disability** - Employee has become disabled.
Note: Disability is defined in the Internal Revenue Code as being unable to engage in any substantial gainful activity by reason of a medically determinable physical or mental impairment which can be expected to result in death or to be of long-continued and indefinite duration. By signing this Distribution Form, you certify that you meet the requirements for a disability distribution. A series of periodic distributions can not be requested if shares are subject to a contingent deferred sales charge.
- Death** - Employee has died. (Go to Section 6.)
- Qualified Domestic Relations Order (Divorce)** - Employee has been ordered by a court to transfer or distribute assets from the account to a current or former spouse or child of the Employee pursuant to a qualified domestic relations order.
Note: If the recipient wishes to deposit the assets being transferred or distributed into an Invesco Aim account in his or her name, he or she must complete an Account Application unless an account is already established. If the recipient is a spouse or former spouse, he or she may also roll over the assets being transferred into an IRA or qualified retirement plan.



- Excess Contributions** - Employee has made elective deferral contributions to the account in excess of the annual elective deferral limit and needs to remove the excess contribution and investment earnings attributable to such contribution.
Note: Excess contributions are taxable for the year in which the contributions are made. Excess contributions may be distributed before April 15 of the year following the year in which the excess contributions are made. Excess contributions that are not distributed before such deadline may only be distributed when otherwise distributable (i.e., following death, disability, attainment of age 59½ or on the basis of hardship) and the distribution will be taxable.
- Termination of Employer's 403(b) Plan** - Employer's signature required in Section 12.
- Transfer of Assets** - Employee is transferring the assets from an AIM 403(b) custodial account to another contract or custodial account not maintained by the Custodian.
Note: A letter of acceptance (or similar form) signed by the new custodian and a representation signed by the new custodian or employer that the new custodian is an approved vendor under the employer's plan or has obtained an employer information sharing agreement with the employer, necessary to comply with Section 403(b) of the Code and the final regulations promulgated there under, are required prior to the Custodian making any transfers.
- Direct Rollover** - Depositor is rolling over assets into another retirement plan or **Direct Conversion** - Depositor is rolling over assets into a Roth IRA. One of the following must apply to be eligible to rollover or convert assets.
 - Severance from employment/Plan Termination
 - Age 59½
 - Death of Employee and spouse is the beneficiary.
 - Other _____

4 General Distribution Instructions

Frequency of distribution:

- One-time distribution.
- I wish to establish a series of periodic distributions, to be paid out:
 1. Withdrawal Frequency (*Select only one option below.*)
 - Monthly
 - Quarterly
 - Annually (Not available for Class B or C shares.)
 2. Transactions should begin during the month of _____ (e.g., Jan, Feb, etc.)
 3. Transactions should occur on the following day of the month _____ (with the exception of the 29th, 30th and 31st)

Amount of distribution: (Check one.)

- Distribute the entire account. Do not select this option if you elected to receive periodic distributions above.
- I do not have an outstanding loan.
- I have an outstanding loan and understand the outstanding loan balance (principal plus interest) will be deemed a distribution and Invesco Aim will generate a Form 1099-R at the end of the year in the amount of the outstanding loan balance plus the amount of the distribution you are requesting at this time. **By signing this form, you are agreeing to these terms and conditions.**
- I would like to receive the following dollar amount from the account: \$, . . I authorize and direct IAIS to redeem additional fund shares in amounts necessary to pay any applicable account maintenance fees, contingent deferred sales charges and federal income tax withholding. If you selected periodic distributions above, this will be the amount of each installment distribution. I understand this amount will be reduced by any applicable redemption fees.
- Distribute the following dollar amount from the account: \$, . . I understand that the amount of the distribution check that I receive will be reduced by any applicable account maintenance fees, redemption fees, contingent deferred sales charges and federal income tax withholding. If you selected periodic distributions above, this will be the amount of each distribution.

5 Required Minimum Distributions During Employee's Lifetime

If you are taking required minimum distributions (because you have retired from the employer maintaining the section 403(b) plan and attained age 70½), you may calculate the amount required to be withdrawn from your account each year or IAIS can calculate the amount required to be withdrawn. If you fail to take a required minimum distribution in any tax year, the amount of the deficiency may be subject to a 50% excess accumulations tax imposed by the IRS. (Check all that apply.)

Invesco Aim to recalculate annually:

- I would like IAIS to recalculate my required minimum distribution and pay it out based on the following elections: (**If this method is selected, Proportionate is the only option available under Redemption Instructions.**)
 - Determine my required minimum distribution amount using the IRS Uniform Lifetime Table.
 - Determine my required minimum distribution amount using the IRS Joint Life Expectancy Table. (This option is only available if your spouse is and has been your sole primary beneficiary during the entire calendar year for which you are taking the distribution and he or she is more than ten years younger than you.)

My date of birth is: (mm/dd/yyyy)

□□ / □□ / □□□□

My spouse's date of birth is: (mm/dd/yyyy)

□□ / □□ / □□□□

If IAIS did not maintain your account at the close of last year, please provide your year end account balance, plus the amount of any rollovers or transfers into the account which were distributed from another plan in the prior year but not received into the account until the current year:

\$ □□□□ , □□□□ . □□ .

Frequency of distribution:

- One-time distribution.
- I wish to establish a series of periodic distributions, to be paid out:
 1. Withdrawal Frequency (*Select only one option below.*)
 - Monthly
 - Quarterly
 - Annually (Not available for Class B or C shares.)
 2. Transactions should begin during the month of _____ (e.g., Jan, Feb, etc.)
 3. Transactions should occur on the following day of the month _____ (with the exception of the 29th, 30th and 31st)

Employee to recalculate annually:*

***Note:** The amount of your required minimum distribution will change each year, based on your account value at the end of the preceding year. You are responsible for re-calculating the amount of your required distribution for each year and providing IAIS with updated instructions, as necessary. The amount shown below will continue to be made to you on a monthly or quarterly basis until you instruct us otherwise.

- I have calculated the amount of my required minimum distribution and would like it paid out as follows:

Distribute the following dollar amount from the account: \$ □□□□ , □□□□ . □□ .

Frequency:

- This is a one-time distribution.

***Note:** Once minimum distributions are required to begin, you may be required to receive a minimum distribution each year. The amount of the required distribution will change each year, based on your account value at the end of the preceding year. If you select this option, no other distributions will be made to you unless and until you instruct us otherwise.
- I wish to establish a series of periodic distributions, to be paid out:
 1. Withdrawal Frequency (*Select only one option below.*)
 - Monthly
 - Quarterly
 2. Transactions should begin during the month of _____ (e.g., Jan, Feb, etc.)
 3. Transactions should occur on the following day of the month _____ (with the exception of the 29th, 30th and 31st)

6 Death Distribution(s) Information

- If the Employee dies on or before the April 1st following the year in which he/she attains age 70 ½ (the "Required Beginning Date"), before required minimum distributions have commenced, all assets remaining in the Employee's account must be distributed by the end of the fifth year following the Employee's death unless (i) the beneficiary is a natural person or qualifying trust designated by the Employee (a Designated Beneficiary) and required minimum distributions are taken beginning in the year following the year of the Employee's death (in which case, distributions must be made over the Designated Beneficiary's life expectancy), or (ii) the Employee has designated the Employee's spouse as beneficiary (in which case, distributions must be made over the spouse's life expectancy beginning no later than December 31 of the year in which the Employee would have attained age 70½).
- If the Employee dies after the Required Beginning Date the account will be distributed (i) if the Employee named a Designated Beneficiary, over the longer of the Employee's remaining life expectancy at death or the Designated Beneficiary's life expectancy, (ii) if the Employee named the Employee's spouse as the Designated Beneficiary, over the longer of the Employee's remaining life expectancy at death or spouse's life expectancy, (iii) If the Employee did not name a Designated Beneficiary, over the Employee's remaining life expectancy at death.
- If there are multiple Beneficiaries, each Beneficiary may make elections relative to his or her share of the account if separate accounts for each Beneficiary are established by December 31 of the year following the year of the Employee's death. Otherwise, distribution generally will be based on the life expectancy of the oldest beneficiary. Additional rules may apply. For more information on these rules, please see IRS Publication 590 or call IAIS.
- You may calculate the amount required to be withdrawn from your account or IAIS can calculate the amount required to be withdrawn. If a Beneficiary fails to take a required minimum distribution in any tax year, the amount of the deficiency may be subject to a 50% excess accumulation tax imposed by the IRS.

Additional Documentation Requirements and Instructions:

- A certified death certificate must be provided*
 - Letters of testamentary or a certified copy of the small estate affidavit must be provided **IF** no Beneficiary was designated by the Employee, **and***
 - the Employee's surviving spouse will be the Beneficiary OR
 - the Employee was unmarried at the time of his or her death, and the Employee's estate is the Beneficiary
 - Each Beneficiary must submit a completed Distribution Form
 - The Distribution Form must be Signature guaranteed in Section 13
 - If a Beneficiary is requesting an immediate distribution of his or her entire interest in the account, he or she must submit a completed IRS Form W-9
 - If a Beneficiary is electing to maintain the account and distribute his or her interest over five years or over a life expectancy, the Beneficiary will contact IAIS to obtain the appropriate account application.
- *In lieu of providing certified documents the Beneficiary may provide a medallion signature guarantee in section 13 of this distribution form.

Distribution instructions: (Complete Section I or II)

I. Beneficiary Annual Recalculation Election:

Note: The amount of your required minimum distribution will change each year, based on your account value at the end of the preceding year. **You are responsible for re-calculating the amount of your required distribution for each year and providing IAIS with updated instructions, as necessary.** The amount shown below will continue to be made to you on a monthly or quarterly basis until you instruct us otherwise.

- I would like to receive the following dollar amount from the account: \$, . . I authorize and direct IAIS to redeem additional fund shares in amounts necessary to pay any applicable account maintenance fees, contingent deferred sales charges and federal income tax withholding. If you selected periodic distributions, this will be the amount of each installment distribution. I understand that this amount will be reduced by any applicable redemption fees.
- Distribute the following dollar amount from the account: \$, . . I understand that the amount of the distribution check that I receive will be reduced by any applicable account maintenance fees, redemption fees, contingent deferred sales charges and federal income tax withholding. If you selected periodic distributions, this will be the amount of each distribution.

Frequency:

- This is a one-time distribution.
Note: You may be required to receive a minimum distribution each year. The amount of the required distribution will change each year, based on your account value at the end of the preceding year. If you select this option, no other distributions will be made to you unless and until you instruct us otherwise.
- I wish to establish a series of periodic distributions, to be paid out:
1. Withdrawal Frequency (*Select only one option below.*)
 - Monthly Quarterly
 2. Transactions should begin during the month of _____ (e.g., Jan, Feb, etc.)
 3. Transactions should occur on the following day of the month _____ (with the exception of the 29th, 30th and 31st)

II. Invesco Aim Annual Recalculation Method: (If this method is selected, Proportionate is the only option available under Redemption Instructions.)

- I am the Designated Beneficiary of the account for purposes of calculating required distributions, and I would like IAIS to calculate my required minimum distribution each year and pay it out based on the following information:

Check one:

- I am the surviving spouse of the Employee. My date of birth is: (mm/dd/yyyy)
 / /
- I am not the surviving spouse of the Employee. My date of birth is: (mm/dd/yyyy)
 / /
- The beneficiary is a trust. If beneficiaries are named for the trust, and the owner died before his or her Required Beginning Date, proceeds distributed may be based on the eldest primary beneficiary's single life expectancy. If the Employee died after his or her Required Beginning Date, proceeds distributed may be based on the account owner or eldest primary beneficiary's single life expectancy.
 The date of birth for the calculation is: (mm/dd/yyyy)
 / /
- The beneficiary is the Employee's Estate. Distributions may be based on the Employee's single life expectancy if the Employee died after his or her Required Beginning Date.

Frequency of distribution:

- I wish to establish a series of periodic distributions, to be paid out:
1. Withdrawal Frequency (Select only one option below.)
Monthly Quarterly
2. Transactions should begin during the month of (e.g., Jan, Feb, etc.)
3. Transactions should occur on the following day of the month (with the exception of the 29th, 30th and 31st)

7 Series of Substantially Equal Periodic Payments (Check either I or II below.)

I wish to establish a series of substantially equal periodic payments according to the following elections and based on the following information: (The Employee, if younger than age 59½, must be separated from service in order to avoid the IRS 10% premature distribution penalty when choosing this option.)

Note: Invesco Aim will report substantially equal periodic payment distributions as a code 1 (early distribution) on the Form 1099-R. The Employee is responsible for filing a Form 5329 with the IRS to report such distributions in order to avoid the 10% penalty.

I. Required Minimum Distribution Method. The payment for each year should be determined by dividing my account balance for that year by my life expectancy factor, utilizing the following life expectancy table: (If this method is selected, Proportionate is the only option available under Redemption Instructions.)

- IRS Uniform Lifetime Table
IRS Single Life Expectancy Table
IRS Joint Life Expectancy Table

My eldest primary beneficiary's date of birth is: (Required only if you have elected to use the IRS Joint Life Expectancy Table.) (mm/dd/yyyy)

Grid for entering date of birth: [][] / [][] / [][][][]

II. Fixed Amortization Method. I have determined the payment for each year by amortizing in level amounts my account balance over a specified number of years utilizing one of the IRS life expectancy tables and a reasonable interest rate.

Fixed Annuitization Method. I have determined the payment for each year by dividing my account balance by an annuity factor that is the present value of an annuity of \$1 per year beginning at my age and continuing for the expectancy of my life or the joint lives of myself and my eldest primary beneficiary. The annuity factor is derived using the mortality table provided in IRS Revenue Ruling 2002-62.

I would like to receive the following dollar amount from the account: \$ [][][][] , [][][][] . [][][] . I authorize and direct IAIS to redeem additional fund shares in amounts necessary to pay any applicable account maintenance fees, contingent deferred sales charges and federal income tax withholding. I understand that this amount will be reduced by any applicable redemption fees. If you selected periodic distributions, this will be the amount of each distribution.

Distribute the following dollar amount from the account: \$ [][][][] , [][][][] . [][][] . I understand that the amount of the distribution check that I receive will be reduced by any applicable account maintenance fees, redemption fees, contingent deferred sales charges and federal income tax withholding. If you selected periodic distributions, this will be the amount of each distribution.

III. Frequency of distribution:

- I wish to establish a series of periodic distributions, to be paid out:
1. Withdrawal Frequency (Select only one option below.)
Monthly Quarterly Annually (Not available for Class B or C shares.)
2. Transactions should begin during the month of (e.g., Jan, Feb, etc.)
3. Transactions should occur on the following day of the month (with the exception of the 29th, 30th and 31st)

8 Redemption Instructions (Make the requested distribution by redeeming shares of the following AIM funds.) LAIS will default to a prorata distribution if any option is not selected.

- Proportionate** - Shares will be redeemed from each AIM fund in which your account holds shares in the proportion that such investment represents with respect to the total value of your account at the close of business on the day on which the shares are redeemed.
- Distribution From Specific Fund(s)** (Please indicate the fund(s) and redemption amounts below.)

| Fund Number | Fund Name | Percentage | Amount |
|---|-----------|--|--------|
| <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | _____ | <input type="text"/> <input type="text"/> <input type="text"/> or \$ _____ | _____ |
| <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | _____ | <input type="text"/> <input type="text"/> <input type="text"/> or \$ _____ | _____ |
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| <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | _____ | <input type="text"/> <input type="text"/> <input type="text"/> or \$ _____ | _____ |

9 Payment Options (If the address of record or bank information has changed within the past 30 days or bank information is not on file, a signature guarantee is required in Section 13.)

By Check:

- Make check payable to the Employee and mail to the Employee's address of record.
- Make check payable to new custodian or plan trustee as a transfer or rollover per the attached letter of acceptance.
- Mail check to third party address (Signature Guarantee required in Section 13)

Make check payable to:

Street Address (Including apartment or P.O. Box number)

City

State

ZIP

By Transfer in Kind:

- Roll over proceeds in-kind into an AIM Traditional/Rollover IRA/Roth IRA. (Please have the Employee provide an existing Invesco Aim account number or complete and attach the appropriate AIM IRA application if Participant does not have an existing account.)

- Existing AIM Traditional IRA

Account Number:

- Existing AIM Roth IRA

Account Number:



Deposit the proceeds into my existing Invesco Aim account in the following AIM Funds. (Exchanges must be for shares of the same share class).

| Fund Number | Account Number | Percentage | Amount |
|---|---|--|-------------|
| <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/> | <input type="text"/> <input type="text"/> <input type="text"/> | or \$ _____ |
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To Bank:

Wire proceeds to my bank account. (not available for periodic payments.)

ACH Transfer to my bank account. (Allow 2-3 business days to receive your proceeds.)

Bank Name

Name(s) on Bank Account

Account Type: Checking Savings

Name

Pay to the order of _____ \$

Please tape your voided check here.

Routing Number

Account Number



10 Federal Income Tax Withholding (You must make an election if 20% mandatory withholding does not apply.)

All 403(b)(7) distributions are subject to 20% federal income tax withholding except for direct rollovers, asset transfers, required minimum distributions, return of excess contributions, financial hardship and some death distributions.

If 20% mandatory withholding does apply to your distribution, IAIS will automatically withhold this amount.

If 20% mandatory withholding does not apply to your distribution, 10% withholding will apply unless you indicate below a different percentage to withhold.

I do not want any federal income tax withheld from my distribution.

I want federal income tax withholding at a rate of %

Withholding will only apply to the portion of your distribution that is included in your income subject to federal income tax. Thus, for example, there will be no withholding on the return of your own nondeductible contributions. If you elect not to have withholding applied to your distributions, or if you do not have enough federal income tax withheld from your distributions, you may be responsible for payment of estimated tax. You may incur penalties under the estimated tax rules if your withholding and estimated tax payments are not sufficient.

Note: Distributions and withholding are taxable and may be subject to a 10% premature distribution penalty if you are under 59½ years of age unless an exception applies.

11 Signature of Employee or Beneficiary(ies) (As applicable)

I hereby affirm that the information given is true and correct, and I authorize and direct the Custodian to make distributions according to the instructions provided on this form.

In addition, by signing this form, I understand and acknowledge that (i) my employer may be required to execute any and all other documents, and to provide and/or share any and all other information, necessary to comply with Section 403(b) of the Code and the final regulations promulgated there under and (ii) there is the risk that if my employer and/or the plan is not in compliance with Section 403(b) of the Code and the final regulations promulgated there under that the distribution being made by IAIS under this form may be considered a disqualifying event by the Internal Revenue Service and reportable by IAIS.

Signature

Date (mm/dd/yyyy)

 / /

Signature

Date (mm/dd/yyyy)

 / /

12 Signature of Employer

IMPORTANT: Beginning on January 1, 2009, IAIS may require the Employer to certify factual information within its knowledge as employer prior to making any distributions to the Employee (or the Beneficiary) from the Account. Requests for required minimum distributions, distributions due to death, or qualified domestic relations order will not require the signature or certification of the employer.

The information provided in connection with this request is true and accurate. The distribution directed is one that the Employee (or the Beneficiary) is permitted to receive.

Furthermore, the individual signing this form on behalf of the employer referenced below hereby represents and warrants that he/she is duly authorized to execute this form on behalf of the employer and to legally bind the employer to the terms and conditions stated herein.

Signature

Date (mm/dd/yyyy)

 / /

Print Name and Title of Authorized Signer

13 Signature Guarantee

A signature guarantee is required if the amount to be distributed is over \$250,000.00, if the proceeds are to be made payable to a person other than the account owner, if the proceeds are to be wired or mailed to an address other than the address of record on the account, or if the address changed within 30 days.

Signature Guarantee:

In order to establish these privileges, all signatures must be guaranteed.

(Please Place Signature Guarantee stamp here)

Each signature of shareholder must be guaranteed by a bank, broker-dealer, savings and loan association, credit union, national securities exchange or any other "eligible guarantor institution" as defined in rules adopted by the Securities and Exchange Commission. Signatures may also be guaranteed with a medallion stamp of the STAMP program or the NYSE Medallion Signature Program, provided that the amount of the transaction does not exceed the relevant surety coverage of the medallion. A signature guarantee may not be obtained through a notary public.

14 Mailing Instructions

Submit form to:

After completing the form, please sign it and send it with any additional required documents to one of the addresses detailed below.

(Direct Mail)

Invesco Aim Investment Services, Inc.
P.O. Box 4739
Houston, TX 77210-4739

(Overnight Mail)

Invesco Aim Investment Services, Inc.
11 Greenway Plaza, Ste. 100
Houston, TX 77046

For additional assistance please contact an Invesco Aim Client Services Representative at 800-959-4246, weekdays, 7 a.m. to 6 p.m. Central Time.

Invesco Aim Website (invescoaim.com)

The Invesco Aim Website gives you 24-hour access to your mutual fund account. By using the Web site, you can obtain the most up-to-date information about your account.

- Check daily and quarterly account balance
- Confirm your account transaction history
- View account statements and tax forms
- Sign up for electronic delivery of prospectuses, reports and statements
- Check the current fund price, yield and total return on any fund
- Retrieve account forms and investor education materials



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