

# Gabelli Funds Systematic Withdrawal Plan

Please call 800-GABELLI (800-422-3554) if you need assistance with this form. DO NOT USE THIS FORM FOR IRA ACCOUNTS

## Account Options (Please choose only one method of distribution):

I would like to have electronic transfers (\$100 minimum) made to my bank checking account from my Fund account\*. The Fund must have a minimum balance of \$10,000 and automatically have all dividends and capital gains reinvested. The transfer will be made on the date you specify (or the next business day) to your designated checking account.

\*PLEASE ATTACH A VOIDED CHECK HERE TO ENSURE PROPER PROCESSING.



I would rather have a check mailed (\$100 Minimum) to my account address. The Fund must have a minimum balance of \$10,000 and automatically have all dividends and capital gains reinvested. The withdrawal will be made on the date you specify (or the next business day) and sent to your address of record.

Please withdraw from my Gabelli \_\_\_\_\_ Fund Account \$\_\_\_\_\_.  
(Select Fund) (Dollar Amount)

## SPECIFY FREQUENCY:

Monthly  Quarterly  Semi Annually  Annually Date payments begin \_\_\_\_\_  
(Date- mm/dd/yy)

\_\_\_\_\_  
Signature of Owner(s) Date

\_\_\_\_\_  
Account Registration (Name as it appears on your Gabelli Funds account. Please print or type)

\_\_\_\_\_  
Address City State Zip

\_\_\_\_\_  
Gabelli Account Number

## MEDALLION SIGNATURE(S) GUARANTEED BY:

\_\_\_\_\_  
Name of Firm or Bank Signature of Officer & Title

## MEDALLION SIGNATURE GUARANTEE REQUIREMENT

A medallion signature guarantee is required for setting up a systematic withdrawal and may be executed by an eligible guarantor as outlined in the Fund's prospectus. Additional documentation may be required for person's acting in a fiduciary capacity or on behalf of a Corporation, Partnership or Trust. Please call 800-GABELLI (800-422-3554) for further instructions.

Please mail form to: Gabelli Funds, PO Box 8308, Boston, MA 02266-8308 OR use the enclosed Business Reply Envelope