

	B Bond - CUSIP #:75	5679A AG4		\$1,000 per Bond	
Rep Name	# of Bonds:				
	B-R Bond – CUSIP #:	: 75679A AH2		\$1,000 per Bond	
Rep ID	# of Bonds:				
				\$	
Investor Account #	B Total \$	B-R Total \$	=	TOTAL AMOUNT	
INVESTOR INFORMATION					
Investor Name (please print)		Investor Name (please print)			
Investor Address		Investor Address			
City, State, Zip		City, State, Zip			
Daytime Phone Email A	ddress	Daytime Phone		Email Address	
Social Security or Tax ID # Birth	Date (mm/dd/yy)	Social Security or Ta	x ID Nu	Birth Date (mm/dd/yy)	
INVESTOR ELIGIBILITY CERTIFIC	CATION				
residence (up to an amount equal to the value be satisfied by the beneficiary of the account I hereby represent and warrant that I meet the I am a natural person, and the aggrencement income, whichever is greater. I am a non-natural person, and the assets, whichever is greater, for my to I am an accredited investor. If you	le of your primary residence) or by the fiduciary, if the fiduciary equalifications to purchase Elegate purchase price for the aggregate purchase price for most recently completed fiscomarked that you are an accookcapitalgroup.com/fund-). In the case of fiduciar ciary directly or indirectl Bonds because (please near Bonds I am purchasing the Bonds I am purchasing al year.	y accounty provided in the pro	·	
INVESTOR ACKNOWLEDGEMENTS AND SIGNATURES					
agree to be bound by the terms and condit 2. (I/We) (am/are) purchasing Bonds for my/c 3. (I/We) acknowledge that the Bonds are Redemptions of Bonds are subject to a rec 4. (I/We) understand this is intended as an in contingencies. 5. (I/We) attest to having the knowledge and 6. (I/We) consider this investment suitable in	ions. bur own account. not traded and there is no demption fee. termediate to long-term inversexperience in financial matter meeting (my/our) overall inverse.	public market for the E estment, and (I/we) have ers such that (I/we) (am/ estment objectives.	Bonds, e adequ (are) ca	and I/we may not be able to sell or redeem the Bonds. uate means of providing for my current needs and personal pable of evaluating the risks of this bond offering. (we) have had the opportunity to have (my/our) questions	
Investor Name (please print)	Signature			Date	
Investor Name (please print)	Signature			Date	
REGISTERED REPRESENTATIVE	AND RIA SUBMISSI	ION AND APPRO	VAL		
Name (please print)	Signature			Date	
Principal Name (please print)	Signature			Date	