

Automatic Withdrawal Plan



A fund family of Everence

If you have any questions regarding this application, please call Shareholder Services at **(800) 977-2947**.

Send completed form to:

Regular mail

Praxis Mutual Funds
c/o U.S. Bancorp Fund Services LLC
P.O. Box 701
Milwaukee, WI 53201-0701

Overnight mail

Praxis Mutual Funds
c/o U.S. Bancorp Fund Services LLC
615 E. Michigan St., 3rd Floor
Milwaukee, WI 53202-5207

Name of account owner _____ Social Security number _____

Name of joint owner _____ Social Security number _____

Registration: Individual Joint UT/GMA
 IRA SEP IRA Roth IRA Other _____

You may make regular, automatic withdrawals of at least \$50 from your Praxis Mutual Funds account(s).

Proceeds to be: Mailed to address of record
 Deposited using bank account information already on my account
 Deposited using bank account below (signature guarantee required)

Bank name _____ Account holder name _____

Address _____
Bank street address (do not use P.O. Box) City State ZIP code

Bank routing/ABA number _____ Bank account number _____

Savings (attach preprinted deposit slip) Checking (attach voided check)

Praxis Mutual Funds for Automatic Withdrawal

| Fund selection | Account number | Amount |
|--|----------------|----------|
| Genesis Portfolios | | |
| Conservative (3171) | _____ | \$ _____ |
| Balanced (3172) | _____ | \$ _____ |
| Growth (3173) | _____ | \$ _____ |
| Money Market Account (3156) | _____ | \$ _____ |
| Impact Bond Fund (3157) | _____ | \$ _____ |
| Value Index Fund (3160) | _____ | \$ _____ |
| Growth Index Fund (3162) | _____ | \$ _____ |
| Small Cap Index Fund (3161) (formerly named Small Cap Fund) | _____ | \$ _____ |
| International Index Fund (3163) | _____ | \$ _____ |
| Total withdrawal | | \$ _____ |

Please choose the day and frequency of the withdrawal.

Day of withdrawal _____ (1-28) Frequency Semi-monthly Monthly Quarterly Starting month _____

By making the above selection, I authorize Praxis Mutual Funds' transfer agent and distributor to redeem shares from my Praxis Mutual Funds account on the stated date(s). I understand that if the day I selected falls on a weekend or holiday, the automatic withdrawal will be run the next business day.

Signature of account owner

Signature of joint account owner

Medallion signature guarantee*

Medallion signature guarantee*

**A signature guarantee may be obtained from any eligible guarantor institution, as defined by the Securities and Exchange Commission. These institutions include banks, saving associations, credit unions and brokerage firms. The words "signature guaranteed" must be stamped or typed near your signature. The guarantee must appear with the printed name, title and signature of an officer and the name of the guarantor institution. Please note that a Notary Public Seal or Stamp is not acceptable.*