



Check Redemption Service (This service is only for non-retirement accounts.)

By electing the check writing redemption service and signing the signature card, I acknowledge that I am subject to the rules and regulations of State Street Bank and Trust ("the Bank") as they currently exist and as they may be amended from time to time. I designate the Bank as my representative to present checks drawn on my fund account to the fund or its agent and deposit the proceeds in this checking account.

I understand that the shares for which share certificates have been issued or requested cannot be redeemed in this manner.

If the account is registered in joint tenancy, all persons must sign this card. I understand that if only one person signs a check, all other tenants have authorized the check redemption.

Minimum and maximum

I understand that checks may not be in amounts less than \$100 or more than \$100,000, and that the fund reserves the right to change these limits at its sole discretion. I agree that neither the fund nor its agent is responsible for any loss, expense or cost arising from these redemptions. Also, if I have recently made additional investments, I understand that redemption proceeds will not be available until the check used to purchase the investment (including a certified or cashier's check) has been cleared by the bank on which it is drawn, which could take up to 6 calendar days or more.

Check Writing Signature Card (Money Market Funds – Class A & Inst shares only)

Signature Card for State Street Bank and Trust ("the Bank")

Name of Fund _____ Fund Account Number _____
Indicate the Number of Signatures Required _____

Account Name: _____
You must sign below exactly as your account is registered. (All registered owners' signatures will be required unless otherwise indicated above.)

Print Name of Account Owner or Authorized Individual _____
Signature of Account Owner or Authorized Individual _____ X
Capacity (if applicable) _____ Date (MM/DD/YYYY) _____

Print Name of Co-Account Owner or Authorized Individual _____
Signature of Co-Account Owner or Authorized Individual _____ X
Capacity (if applicable) _____ Date (MM/DD/YYYY) _____

If adding this service to an existing account, your signature must be Medallion guaranteed.

By signing this card, you are subject to the conditions printed above.

Affix Medallion Signature Guarantee stamp here. [Blank box]

Affix Medallion Signature Guarantee stamp here. [Blank box]

Return Instructions

Regular mail	Columbia Management Investment Services Corp. P.O. Box 219104 Kansas City, MO 64121-9104	Overnight mail	Columbia Management Investment Services Corp. c/o SS&C GIDS, Inc. 430 W 7th Street, STE 219104 Kansas City, MO 64105-1407
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For assistance completing this form, please contact a representative at 800.345.6611, Monday through Friday, 8:00 a.m. to 7:00 p.m. Eastern time. Columbia Threadneedle Investments (Columbia Threadneedle) is the global brand name of the Columbia and Threadneedle group of companies. Columbia Management Investment Services Corp. is the transfer agent for Columbia Funds.