

Use this form to add or change the options on your account. You must complete sections 1 and 6 to add or change any options on your account.

**For Regular Mail Delivery**

Artisan Partners Funds  
P.O. Box 8412  
Boston, MA 02266-8412

**For Overnight Delivery**

Artisan Partners Funds  
30 Dan Road  
Canton, MA 02021-2809

**Questions?** Call 800.344.1770 or visit [www.artisanpartners.com](http://www.artisanpartners.com)

## 1. Account Registration (Please type or print clearly)

Account Number	Account Number	
Account Number	Account Number	
Owner, Trust or Other Entity's Name (First, Middle, Last)	Social Security Number / Tax Identification Number	(    ) Phone
Joint Owner or Trustee's Name (First, Middle, Last)		

## 2. Change of Address

New Street Address*		
City	State	Zip
New Mailing Address (If different from Street Address)		
City	State	Zip

\*You must be a US resident with a US mailing address. If your mailing address is a post office box, for compliance reasons you must also provide a US street address to invest in Artisan Partners Funds, however correspondence will only be sent to the mailing address.

## 3. Name Change

Owner's New Name (First, Middle, Last)	Social Security Number / Tax Identification Number	Date of Birth (MM-DD-YYYY)
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The account owner must have his/her new signature validated in Section 6.

## 4. Bank Information

Your US bank account information must be on file in order to receive distributions or redemptions by Automated Clearing House (ACH)/Electronic Funds Transfer (EFT) directly to your bank account, purchase additional shares by telephone or establish an AIP. If you do not provide bank information, any dividends and distributions not reinvested and the proceeds of any redemption will be paid by check mailed to your mailing address of record. At least one name on the bank account must match exactly the name in Section 1. For checking accounts, a blank voided check is necessary to provide account and bank routing information and must accompany this Form (mutual fund money market checks may not be used). For savings accounts provide a pre-printed deposit slip to indicate account and bank routing number. Your bank must be a US bank and a member of the ACH to effect EFT transactions. **Note: A Signature Verification is required in Section 6 to add this option.**

Checking (if selected attach a voided check below)       Savings (if selected attach a pre-printed deposit slip below)

The following authorization is required for EFT transactions: By signing Section 5, I authorize Artisan Partners Funds to initiate (i) credit entries (deposits) (for telephone redemption, payment of distributions or systematic withdrawals with payment by EFT), (ii) debit entries (withdrawals) (for the AIP or telephone purchases with payment by EFT) and (iii) debit or credit entries and adjustments for any entries made in error to my bank account identified above. This authorization will remain effective until I notify Artisan Partners Funds in writing or by telephone of its termination and until Artisan Partners Funds has reasonable time to act on that termination. To discontinue or change an AIP, please notify us at least 14 days prior to the next scheduled withdrawal date.

Attach Blank, Voided Check or Deposit Slip

## 5. Account Options

### Cost Basis

As part of the Emergency Economic Stabilization Act of 2008, mutual fund companies will be required to report cost basis information to shareholders and to the Internal Revenue Service (IRS) on mutual fund shares acquired and subsequently redeemed after January 1, 2012. In order to provide you and the IRS with accurate cost basis accounting you are being asked to select a cost basis method for your new account.

Select one of the following cost basis methods. Your election will be used when calculating the gain or loss for all future sales of shares. If no election is made, the Funds default cost basis method of Average Cost will be applied to your account(s).

- |   |   |
|---|---|
| <input type="checkbox"/> Average Cost (ACST)  | <input type="checkbox"/> First In, First Out (FIFO)   |
| <input type="checkbox"/> Last In, First Out (LIFO)  | <input type="checkbox"/> High Cost, First Out (HIFO)  |
| <input type="checkbox"/> Low Cost, First Out (LOFO)                                       | <input type="checkbox"/> Loss/Gain Utilization (LGUT) |
| <input type="checkbox"/> Specific Lot Identification (SLID) (Complete Secondary Election) |   |

Secondary Election: \_\_\_\_\_ (For SLID method—options: FIFO, LIFO, HIFO, LOFO, LGUT)  
(Secondary Method will be used in the event of any automated transactions, or for a redemption placed without specific lot identification.)

Consult your tax advisor to determine which method best suits your individual tax situation. Your elected cost basis method will be applied to future accounts opened in the Funds with the same account type and registration. For more information regarding cost basis reporting, please visit [www.artisanpartners.com](http://www.artisanpartners.com) or call 800.344.1770.

### Distribution Options

Change my distribution options to:

- |                                       |                                   |                                      |
|---------------------------------------|-----------------------------------|--------------------------------------|
| Ordinary Dividends:                   | <input type="checkbox"/> Reinvest | <input type="checkbox"/> Pay in cash |
| Short Term & Long Term Capital Gains: | <input type="checkbox"/> Reinvest | <input type="checkbox"/> Pay in cash |

If any distributions are to be paid in cash, specify payment method:

- Deposit to your US bank account via Automated Clearing House/Electronic Funds Transfer (EFT). You must provide bank account information in Section 4 and attach a voided check to request this option.
- Send check to mailing address listed in Section 2.

## 5. Account Options (Continued)

### Telephone Options

#### Redemption

Check the box below to authorize the telephone redemption option.

**Yes, I want the telephone redemption option.**

This option allows you to redeem shares by telephone. Any amount of shares may be redeemed if you have provided valid bank information on your account (see Section 4) to transfer funds via Electronic Funds Transfer (EFT) or wire. If no bank information is provided, telephone redemptions will be limited to \$50,000 each and a check will be sent to the address of record. For EFT or wire transactions you must provide bank account information in Section 4 and attach a "voided" check.

**Note:** A signature verification is required in Section 6 to add this option.

#### Purchase

Check the box below to authorize the telephone purchase option (\$50 minimum; \$50,000 maximum).

**Yes, I want the telephone purchase option.**

Your purchase will be effected on the business day of your call, if you call before the time as of which the Fund calculates its NAV, or on the next business day after your call if you call after the time as of which the Fund's NAV have been calculated for the day. You must provide bank account information in Section 4 and attach a "voided" check.

### Consent to E-Delivery

Reduce clutter in your mailbox and help the environment by signing up for E-Delivery. Indicate if you would like to receive your statements and other important documents online. You will receive a notification to the email address provided in Section 1 informing you that the documents are available for viewing online. You can change this election at any time. Confidential account information will not be sent via email.

**All Available Documents\***

OR select document type(s):

**Fund Reports, Prospectus, Privacy Statements, Proxies and Special Announcements**

**Account Statements**

**Confirmations\***

**Tax Forms\***

\*We currently do not offer online delivery of confirmations or tax statements. However, we may commence operations of online delivery of these documents in the near future. In such case, you will automatically be enrolled for E-Delivery notifications if you make this election.

### Systemic Withdrawal Plan (SWP)

Please select:  New SWP or  Change Existing SWP

You may redeem a fixed dollar amount (\$50 minimum monthly) from your account each month, quarter or year and have the proceeds sent by mail to a designated address. The account value must be \$5,000 or more to begin this plan. Designate a date between the 3rd and 28th day of the month only. Your redemption will happen on or about the date requested. If a redemption date falls on a weekend or holiday, it will be processed the next business day. Payments will be made by redeeming the appropriate number of shares in the account at the current net asset value. If you sell or exchange shares of Artisan High Income Fund that you have owned for 90 days or less, the Fund will charge a redemption fee of 2% of the redemption proceeds.

Begin withdrawal on (mm-dd-yyyy) (must be between 3rd and 28th day of the month)

Account Number

Amount (\$50 monthly minimum)

Preferred investment schedule:  Monthly  Quarterly  Semi-annually  Annually

Please select the way you would like to receive your Systematic Withdrawal Plan proceeds:

Check made payable to the account owner(s) and sent by mail to the address on the account.

Proceeds by ACH/Electronic Funds Transfer (EFT) to my US bank account (Complete Section 4 and attach voided check). **A signature verification is required in Section 6 to send the proceeds to a US bank account other than the US bank account you previously designated on your Artisan Partners Funds account.**

Check made payable to the account owner(s) or a special payee and sent by mail to the address listed below. **A signature verification is required in Section 6 to send the proceeds to a US bank account other than the US bank account you previously designated on your Artisan Partners Funds account.**

Name of Recipient (First, Middle, Last)

Address

City

State

Zip

## 5. Account Options (Continued)

### Automatic Investment Plan (AIP)

You may purchase a fixed dollar amount to your account each month, quarter or year (a minimum of \$50 per month or a total for the period that equals \$50 per month) with proceeds debited from a specified US bank account. To establish Electronic Funds Transfer (EFT) from your US bank account into an Artisan Partners Fund, complete this section and attach a voided check clearly marked "VOID" (see Section 4). Designate a date between the 3rd and 28th day of the month only. Your investment will be withdrawn from your bank account on or about the date requested. If a withdrawal date falls on a weekend or holiday, your payment will be transferred from your bank account on the banking day prior to the withdrawal date. If no date is indicated, the 15th of the month will be the withdrawal date. Your bank must be a member of the Automated Clearing House (ACH).

Begin investment on (MM-DD-YYYY) (must be between 3rd and 28th day of the month)

Account Number Amount (\$50 monthly minimum)

Account Number Amount (\$50 monthly minimum)

Preferred investment schedule:  Monthly  Quarterly  Semi-annually  Annually

## 6. Signature

**Note:** You must provide signature verification to:

- 1) Establish the telephone redemption option.
- 2) Make Systemic Withdrawal Plan proceeds payable by EFT to a different US bank.
- 3) Send Systematic Withdrawal Plan proceeds to someone other than the account owner.
- 4) Send Systematic Withdrawal Plan proceeds to an address that is different than your address of record.
- 5) Change US bank account information.
- 6) Change your name.

I/we authorize Artisan Partners Funds to add or change the options designated above and to systemically withdraw the amount listed below from the referenced Artisan Partners Funds account (if the Systemic Withdrawal Plan is selected). I/we agree to be bound by the additional details and conditions pertaining to these options found in the prospectus.

Owner's Signature (As it appears in Section 1)

Date (MM-DD-YYYY)

Joint Owner's Signature (As it appears in Section 1)

Date (MM-DD-YYYY)

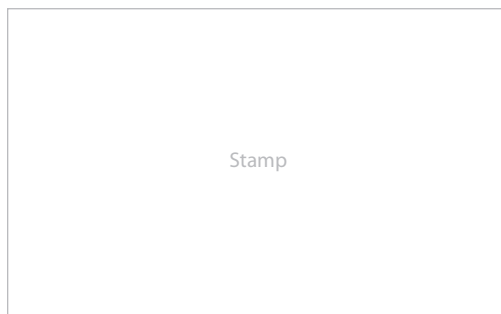
### Signature Verification Options

Medallion Signature Guarantee, SVP Stamp Guarantee or Notary Public Stamp

Name of Bank or Firm Providing Medallion Signature Guarantee

Authorized Signature and Stamp

Date (MM-DD-YYYY)



Note: A Medallion Signature Guarantee and SVP stamp may be obtained from a domestic bank or trust company, broker, dealer, clearing agency, savings association or other financial institution which participates in a Medallion program recognized by the Securities Transfer Association. A notary public stamp can be obtained from a notary public signing agent.