GOF FAO 07/14

FRANKLIN TEMPLETON INVESTMENTS

Franklin Templeton **Account Options Form**

Please complete appropriate section(s) and have ALL applicable owners sign in Section 7.

This form is to be used **ONLY** if you are revising an existing Franklin Templeton account. Use this form to:

- Establish or change **Bank Information** for any options for transfers to or from your bank account
- Establish, change or discontinue an **Automatic Investment Plan**
- Establish, change or discontinue a **Systematic Withdrawal Plan**
- Change **Dividend and/or Capital Gains Distribution and Payment Options**
- Change your **Contact Information**
- Establish **Check Writing**

If completing by hand, please print clearly in CAPITAL LETTERS using blue or black ink.

ACCOUNT OWNER NAMES | Primary phone number ( ) | Alternate phone number ( )

1 BANK INFORMATION/ELECTRONIC SERVICES AUTHORIZATION[1]

Please establish/change electronic transfers to or from my bank account. Only one bank account can be linked to my Franklin Templeton account(s) for purchases and redemptions. If my bank or credit union is not an Automated Clearing House (ACH) member, this service is not available.

If I previously declined the Telephone Redemption Privilege but would like Telephone Purchases, I understand that Telephone Purchases and Telephone Redemptions via electronic funds transfers between my Franklin Templeton account(s) and my linked bank account are operationally connected. If I complete this form, I authorize **all** electronic services on my account(s).

NOTE: These bank instructions will be established for purchases, redemptions and any pre-established systematic withdrawals or dividend/capital gain payments.

If there is a difference between the Franklin Templeton fund account owner(s) and the bank account owner(s), all bank account owners must sign in Section 7 and have their signatures guaranteed; and all registered owners signing in Section 7 must also have their signatures guaranteed.

NOTE: If the Franklin Templeton fund account is registered to FTB&T as custodian/trustee for a retirement plan or education savings account, or as a custodial account for a minor (UGMA/UTMA) and there is at least one common owner on the Franklin Templeton fund account and the bank account, signature guarantees are not required.

FRANKLIN TEMPLETON FUND-ACCOUNT NUMBER(S)

NAME(S) (PRINT AS SHOWN ON FRANKLIN TEMPLETON ACCOUNT REGISTRATION)

☐ Checking account
☐ Savings account

Bank name | Bank account number

BANK ROUTING NUMBER | **NAME(S) (PRINT AS SHOWN ON BANK ACCOUNT REGISTRATION)**

Tape a preprinted voided check or preprinted savings account deposit slip here.

Bank account registration information (your name and address) cannot be blank or handwritten.

Do not staple.

J. A. Sample
123 Street
Anywhere, USA 00000

XXXXX

VOID

DATE

PAY TO THE ORDER OF:

DOLLARS

FOR

XXXX XXX XXXX XXXX XXXXX XXXXXX XXXXX

1. Requests to send proceeds electronically within 15 days of establishing or changing banking instructions must be signature guaranteed, otherwise your proceeds may be sent by check to your address of record or an alternate mailing address (if one exists on your account) during this time.

Questions? Please call your financial advisor or Franklin Templeton at **(800) 632-2301.**

(continued)

2 AUTOMATIC INVESTMENT PLAN – ESTABLISH, CHANGE OR DISCONTINUE

Please check the appropriate box(es) below to establish, change or discontinue an automatic investment plan.

☐ Please discontinue my automatic investment plan from the following fund account number(s).

☐ Please establish or change my automatic investment transfers directly from my bank account (complete Section 1) according to the options selected below. If a selection is not made, we will default to monthly on the 20th. Please allow up to 15 business days from receipt by Franklin Templeton Investments for initial processing.

FUND-ACCOUNT NUMBER	AMOUNT ($50 minimum for each)	START MONTH	FREQUENCY (select one)	INVESTMENT DATE[2] (select one)
	$		☐ monthly ☐ annually ☐ quarterly	☐ 1st ☐ 10th ☐ 20th ☐ 5th ☐ 15th ☐ 25th
	$		☐ monthly ☐ annually ☐ quarterly	☐ 1st ☐ 10th ☐ 20th ☐ 5th ☐ 15th ☐ 25th
	$		☐ monthly ☐ annually ☐ quarterly	☐ 1st ☐ 10th ☐ 20th ☐ 5th ☐ 15th ☐ 25th
	$		☐ monthly ☐ annually ☐ quarterly	☐ 1st ☐ 10th ☐ 20th ☐ 5th ☐ 15th ☐ 25th

3 SYSTEMATIC WITHDRAWAL PLAN – ESTABLISH, CHANGE OR DISCONTINUE (Not available for Franklin Mutual Recovery Fund)

Do NOT complete for Retirement Plan accounts with Franklin Templeton Bank & Trust, F.S.B. (FTB&T) as custodian or trustee. Please refer to the plan specific Distribution Request Forms on franklintempleton.com or call Retirement Services at (800) 527-2020 for assistance pertaining to retirement account distributions.

Please check the appropriate box(es) below to establish, change or discontinue a systematic withdrawal plan.

☐ Please discontinue my systematic withdrawal plan from the following fund account number(s).

☐ Please establish or change my systematic withdrawals on my fund account(s)[3] according to the options selected below. If a selection is not made, we will default to monthly on the 20th. Please allow at least 15 business days from receipt by Franklin Templeton Investments for initial processing.

FUND-ACCOUNT NUMBER[3]	AMOUNT ($50 minimum for each)	START MONTH	FREQUENCY (select one)	WITHDRAWAL DATE[4] (select one)
	$		☐ monthly ☐ semiannually ☐ quarterly ☐ annually	☐ 1st ☐ 10th ☐ 20th ☐ 5th ☐ 15th ☐ 25th
	$		☐ monthly ☐ semiannually ☐ quarterly ☐ annually	☐ 1st ☐ 10th ☐ 20th ☐ 5th ☐ 15th ☐ 25th
	$		☐ monthly ☐ semiannually ☐ quarterly ☐ annually	☐ 1st ☐ 10th ☐ 20th ☐ 5th ☐ 15th ☐ 25th
	$		☐ monthly ☐ semiannually ☐ quarterly ☐ annually	☐ 1st ☐ 10th ☐ 20th ☐ 5th ☐ 15th ☐ 25th

☐ Direct payments to my existing Franklin Templeton account number _____ (must be the same class as paying account).[5]

We will send the proceeds electronically to the bank account you provide in Section 1 or, if a new bank account is not provided, to a pre-established bank account if one exists. If you do not provide bank information, already have a pre-established bank account on file or choose to direct payments to your existing Franklin Templeton account, we will send the proceeds to you by check, to your mailing address. Please allow up to 3 business days if the proceeds are being sent electronically or up to 10 calendar days to receive a check. For electronic transfers, your first distribution may be sent by check **to your address of record or an alternate address (if one exists on your account)** while bank information is established for your account.

2. If the Investment Date falls on a weekend or holiday, the transaction will be made on the following business day.
3. Minimum balance of $5,000 per account is required.
4. If the Withdrawal Date falls on a weekend or holiday, the transaction will be made on the following business day.
5. Please attach instructions if directing payments to multiple Franklin Templeton accounts and/or new funds.

4 CHANGE DIVIDEND AND/OR CAPITAL GAINS DISTRIBUTION AND PAYMENT OPTIONS

Do NOT complete for Retirement Plan accounts with Franklin Templeton Bank & Trust, F.S.B. (FTB&T) as custodian or trustee. Please refer to the plan specific Distribution Request Forms on franklintempleton.com or call Retirement Services at (800) 527-2020 for assistance pertaining to retirement account distributions.

Please change my dividend and/or capital gains distribution and payment options as identified below.

FUND-ACCOUNT NUMBER(S)

CHECK ONLY ONE OPTION FOR EACH.

Dividends: ☐ Reinvest, ☐ Pay in cash,[6] or ☐ Direct to my Franklin Templeton account number[7]

Capital gains: ☐ Reinvest, ☐ Pay in cash,[6] or ☐ Direct to my Franklin Templeton account number[7]

5 CHANGE CONTACT INFORMATION

Please change my contact information as identified below.

FUND-ACCOUNT NUMBER(S)

CURRENT ADDRESS

Street address of residence (no P.O. Box address) | City | State | ZIP

Mailing address (if different from street address) | City | State | ZIP

NEW ADDRESS

Street address of residence (no P.O. Box address) | City | State | ZIP

Mailing address (if different from street address) | City | State | ZIP

New primary phone number (if applicable) ( ) | New alternate phone number (if applicable) ( ) | Email address[8]

6 ESTABLISH CHECK WRITING – MONEY FUND ONLY

CHECK WRITING AGREEMENT

Please complete for check writing access to Money Fund account(s) listed below. Minimum check writing amount is $500.

FUND-ACCOUNT NUMBER(S)

A free book of checks will be provided, if your account balance is $500 or more.[9] Please allow two weeks for delivery.

☐ Yes, I would like to apply for the convenience of free unlimited check writing and certify and agree that: (1) I am familiar with the prospectus provision discussing "Selling Shares by Check" and agree that my check writing privileges are subject to the terms of the current prospectus, as it may be amended from time to time; (2) any bank appointed by you is authorized to accept each check signed by me and to present the check to my Money Fund as my instruction to redeem an equivalent number of my shares to cover the amount of the check; (3) I understand that the bank will reject and return as unpaid any check that my payee has converted to an electronic debit; (4) I will take care to protect my checks from unauthorized use and will notify you immediately if any check has been lost or stolen; (5) I will be responsible for any check signed in my name by someone with my approval (whether given before or after the check is issued) or for my benefit; (6) I will notify you immediately of the death or incapacity of any person who is authorized to sign my Money Fund checks; and (7) you may require that any check be signed by all owners of my account if you believe in good faith that there is or that there may be a dispute among those of us with signing authority.

☐ **JOINTLY OWNED/CO-TRUSTEE ACCOUNT:** Check here only if ALL joint owners'/co-trustees' signatures will be required on all checks, written instructions to the fund and proxy ballots. If this box is not checked, only ONE SIGNATURE will be required.

6. **IMPORTANT:** If you choose to have dividends or capital gains paid in cash, we will send the proceeds electronically to the bank account you provide in Section 1 or to a pre-established bank account if one exists. If you do not provide bank information, already have a pre-established bank account on file, or choose to direct payments to your existing Franklin Templeton account, we will send the proceeds to you by check, to your current mailing address. Please allow up to 3 business days if the proceeds are being sent electronically or up to 10 calendar days to receive a check. For electronic transfers, your first distribution may be sent by check **to your address of record or an alternate mailing address (if one exists on your account)** while bank information is established on your account.

7. You may only reinvest distributions in the same class of shares, except that Class C distributions may be reinvested in Class A shares of any Franklin money fund, and Advisor Class and Class Z distributions may be reinvested in Class A shares. You may reinvest Class Z distributions in Advisor Class shares of another fund if you qualify to buy that fund's Advisor Class shares.

8. If you currently receive any electronic documents from Franklin Templeton Investments, future documents will be sent to the email address provided on this form, replacing any prior email address on file.

9. If your opening account balance is less than $500, when your balance reaches $500, please call us or, if you're registered on our website, visit franklintempleton.com to order a free book of checks.

7 AUTHORIZED SIGNATURES

If you have requested options for transfers to or from your bank account and there is a difference between the Franklin Templeton fund account owner(s) and the bank account owner(s), all bank account owners must sign here and have their signatures guaranteed; and all registered owners signing here must also have their signatures guaranteed. **NOTE:** If the Franklin Templeton fund account is registered to FTB&T as custodian/trustee for a retirement plan or education savings account, or as a custodial account for a minor (UGMA/UTMA) and there is at least one common owner on the Franklin Templeton fund account and the bank account, signature guarantees are not required.

By signing below I certify and agree that if I request transfers to or from my deposit account identified in Section 1 ("Bank Account"), I authorize Franklin Templeton Investor Services, LLC ("Franklin Templeton") to initiate electronic debits and/or credits to the Bank Account identified in Section 1 and on the enclosed voided check or savings account deposit slip, when instructed to do so by me or by my financial advisor, whether online, electronically, by telephone or otherwise (and to make, if necessary, adjusting transfers if any amounts are transferred in error). If the Franklin Templeton account(s) and Bank Account include at least one common owner, I certify that the signature(s) of the Franklin Templeton account owner(s) alone is/are sufficient to authorize debits from the referenced Bank Account.

I understand and agree that this authorization will remain in full force and effect until Franklin Templeton has received notification (whether by telephone or in writing) from one of the Franklin Templeton Fund Account shareholders that this authorization is terminated, and Franklin Templeton and the financial institution have had a reasonable opportunity to act on the notification. I also agree that Franklin Templeton may make additional attempts to debit/credit the Bank Account if the initial attempt fails, and if a transfer is denied by the bank for any reason, Franklin Templeton will discontinue this authorization.

If applicable, please have each signature separately guaranteed by a bank, savings and loan association, trust company, credit union, broker-dealer, or any other "eligible guarantor institution" as defined under the rules adopted by the Securities and Exchange Commission. These institutions often participate in signature guarantee medallion programs such as the Securities Transfer Agent Medallion Program (STAMP). **A notary public cannot provide a signature guarantee.**

All registered fund account owners must sign this section of the Account Options Form.

SIGNATURE	Date	SIGNATURE	Date
X		X	
SIGNATURE GUARANTEE STAMP (if required)		SIGNATURE GUARANTEE STAMP (if required)	
SIGNATURE	Date	SIGNATURE	Date
X		X	
SIGNATURE GUARANTEE STAMP (if required)		SIGNATURE GUARANTEE STAMP (if required)	

Before you submit…

SECTION 1

If the options selected require bank information, did you include a preprinted voided check for your checking account or a preprinted deposit slip for your savings account?

If there is a difference between the Franklin Templeton fund account owner(s) and the bank account owner(s), did you provide any additional signatures and signature guarantees for all bank account owners as well as the signature guarantees for the registered owners in Section 7?

SECTION 2 AND 3

Did you provide the amount, start month, frequency, and investment or withdrawal date?

SECTION 7

All registered owners named in Section 1 are required to sign and date the form. Did you provide all required signatures and/or signature guarantees?

Please mail to

	Franklin Templeton Investments **P.O. Box 33033** **St. Petersburg, FL 33733-8033**
Overnight	**Franklin Templeton Investments** **100 Fountain Parkway** **St. Petersburg, FL 33716-1205**
Fax numbers*	**(916) 463-4521** **or** **(727) 299-8706**

*Faxed forms are not accepted if signature guarantee stamps are required or if telephone privileges were previously declined.

PLEASE MAKE A PHOTOCOPY OF THE COMPLETED FORM FOR YOUR RECORDS

franklintempleton.com

Questions? Please call your financial advisor or Franklin Templeton at **(800) 632-2301.**

© 2014 Franklin Templeton Investments. All rights reserved.