



# LETTER OF INTENT (LOI) FORM

## MAILING INSTRUCTIONS

Please send completed form to:

### Regular Mail Delivery

Euro Pacific Funds  
PO Box 2175  
Milwaukee WI 53201-2175

### Overnight Delivery

Euro Pacific Funds  
C/O UMB Fund Services, Inc  
235 W. Galena Street  
Milwaukee WI 53212

## PART I: LETTER OF INTENT

I intend to purchase additional shares issued by Euro Pacific Funds over a 13-month period following my initial purchase in order to be eligible for a sales charge discount on my purchase. I agree to the terms of the Letter of Intent described in the applicable prospectus(es) and grant the Fund a security interest in the shares to be reserved. Although I am not obliged to do so, the aggregate amount of the Fund shares I intend to purchase over the 13-month period will be in an aggregate amount at least equal to:

\$50,000       \$100,000       \$250,000       \$500,000       \$1,000,000

## PART II: CURRENT ACCOUNT INFORMATION

Request will apply to the following account(s):

Name: \_\_\_\_\_ Taxpayer ID Number: \_\_\_\_\_

Residence Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Fund: \_\_\_\_\_ Account Number: \_\_\_\_\_

Fund: \_\_\_\_\_ Account Number: \_\_\_\_\_

**Please note that additional paperwork may be required for certain transactions. To verify what paperwork needs to be included with your request, please contact Shareholder Services at the number below.**

## PART III: SIGNATURES

If you are not signing as an individual, you must state your title or capacity. Each person signing on behalf of an entity represents that his or her actions are authorized. A list of authorized signers dated within 60 days must be included with this request if you are acting on behalf of an entity.

Account Owner Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Title / Capacity: \_\_\_\_\_

Joint Owner Signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_

Title / Capacity: \_\_\_\_\_