

# DivMove Application

**Mail to:** VanEck Funds, P.O. Box 218407, Kansas City, MO 64121-8407

**Fax to:** 1.816.843.7289

For assistance, please call Account Assistance at **1.800.544.4653**

**Please automatically reinvest my distributions from my originating account into my receiving account without a sales charge as indicated below:**

(check one or both)

- Dividends**       **Capital Gains**

\_\_\_\_\_  
Name(s) of Registered Owner(s) *(please print)*

\_\_\_\_\_  
Street Address

\_\_\_\_\_  
City/State/Zip

**My originating account is:**

- A new account to be set up with the attached application  
 Existing account #: \_\_\_\_\_

**In the following fund:**

Fund Name and Class:  
\_\_\_\_\_

*Note: Class C shares are not eligible*

**My receiving account is:**

- A new account to be set up with the attached application  
 Existing account #: \_\_\_\_\_

**In the following fund:**

Fund Name and Class:  
\_\_\_\_\_

*Note: Class C shares are not eligible*

**X** \_\_\_\_\_

**X** \_\_\_\_\_

Signature(s) of Registered Owner(s) or Broker of Record  
*(\*indicate capacity if applicable)*

Date

Telephone Number