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Cost Basis Request
July 24, 2017

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Joe Dealer
9999 Main Steet
Independence, MO 64055

• Cost Basis Request •

Please forward cost basis information for the following:

Fund:	Premium Growth Fund
CUSIP/ISIN:	123456789
Account Number	1234567890123456789
Client:	Jane Client 27672 Maple Lane Clarksburg, Missouri 65025
Control Number:	12345678901234567890123456789 0
Transfer Date:	7/6/2012
Quantity of Shares:	12,345,679,012.1234

Please send the requested cost basis information to the following address:

ABC Fund Company
ATTN: Cost Basis Transfer Statement Department
1234 Main Street
California, Missouri 65108
Fax: 1.888.800.8000

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1.800.800.8000

Cost Basis Transfer Statement
August 7, 2017

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Joe Dealer
9999 Main Street
Independence, MO 64055

Corrected (if checked) ☐

• Cost Basis Transfer Statement •

Fund: PREMIUMGROWTH FUND
Receiving Firm Account Number: 1234567890123456789
Control Number: 1234567890

CUSIP: 123456789
Delivering Firm Account Number: 76218
Transfer Date: 07/26/2012

Acquisition Date	Shares	Covered	Adjusted Cost Basis	Wash Sale Original Acquisition Date	Acquisition Reason	Date of Gift	Fair Market Value
Various	233.0000	N	$1,199.95	-	-	-	-
3/2/2010	144.9280	N	$800.00	-	-	-	-
2/15/2012	747.5080	Y	$4,500.00	-	-	-	-
3/15/2012	759.8780	Y	$5,000.00	-	Inherited/Gifted*	6/24/2012	$4,000.00
4/15/2012	142.8000	Y	$999.60	-	-	-	-
5/1/2012	849.4850	Y	$6,795.87	-	Inherited	-	-
6/1/2012	250.0000	Y	$1,505.00	-	Gifted	6/24/2012	$2,250.00
7/1/2012	50.0000	Y	$350.00	7/20/2011	-	-	-
99/99/9999	9,999,999,999,999.9999	X	$9,999,999,999,999.99	99/99/9999	XXXXXXXXX	99/99/9999	$9,999,999,999,999.99

* Inherited then Gifted

Cost Basis Statement 4/30/2017

Fund Return Address Line 1
Fund Return Address Line 2
Fund Return Address Line 3
Fund Return Address Line 4
Fund Return Address Line 5

Susan Smith
601 Monroe
Jefferson City MO 65101

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Cost Basis Redemption Information

Susan Smith 601 Monroe Jefferson City MO 65101 Line 4 Line 5 Line 6 Line 7	Blue River Investments Attn: Jane Doe 620 Dealer Lane Jefferson City MO 65101 Rep: Jane Doe Dealer Information: 00001/000
Fund Name: MUTUAL FUND NAME **Fund/Account Number:** 9999999/99999999999	**Cost Basis Accounting Method:** LIFO **Cost Basis Source:** Elected **Cost Basis Status:** Active

Transaction date	Transaction	Dollar Amount	Share Price	Shares	Cost Basis Method	Acquisition Date	Covered/ Noncovered	Cost Basis of Shares Redeemed	Wash Sale Disallowed Amount	Net Capital Gain/Loss	
										Short Term	Long Term
01/12/2011	Redemption	2,707.76	8.00	338.470	LIFO						
						1/15/2009	Noncovered	511.07	0.00		282.82
						3/2/2010	Noncovered	1,044.57	0.00		469.30
						2/15/2012	Covered	301.00	0.00	99.00	
99/99/9999	RedemptionXxXxXxXxXxXX26	99,999,999,999.99	9.999.999.99	9,999.,999.,999.99	LIFO						
						99/99/9999	Noncovered	9,999,999,999.99	9,999,999,999.99		9,999,999,999.99
						99/99/9999	Noncovered	9,999,999,999.99	9,999,999,999.99		9,999,999,999.99
						99/99/9999	Covered	9,999,999,999.99	9,999,999,999.99	9,999,999,999.99	