

## Transaction Request

Mail completed form to:

Overnight Mail

Value Line Funds 330 W 9th Street, 1st Floor Kansas City, MO 64105

## Standard Mail

Value Line Funds P.O. Box 219729 Kansas City, MO 64121-9729

## Questions?

Please call us at 800.243.2729

Please type or print clearly. Blue or black ink only.

Customer Information	20				lease type of print clearly. Dide of black link
Customer information	pn				
	First Name		Middle Initia		ame
	HISTINGHIE		Ivildale il illia	. Lastin	ane
	Street Address		Ap	partment or Su	uite
	City Sta	ate	Zip Code		Primary Phone
	Fund/Account Number				Taxpayer ID Number/Social Security Number
Transaction Reques	t				
r redemptions, the	Please describe your request (NOTE: not acceptable for redemption requests)				
Redemptions Request orm must be used.					
Signature of Shareh	older(s) All authorized registered owners of the ac	count must si	gn		
	Signature of Shareholder			Date (mm/dd	
	Signature of Joint Shareholder, if any			Date (mm/dd	4
	Signature of John Shareholder, if any			Date (mm/dd	(УУУУ)
Medallion Signature	Guarantee				
OTE: A medallion signature arantee may be obtained				Depending	upon your request, a Medallion Signature may
m a domestic bank or					lease call us with any questions at 800.243.272
st company, broker,					
aler, clearing agency,					
vings association, or other ancial institution which					
rticipates in a Medallion					
ogram recognized by					
ne Securities Transfer					

Affix Medallion Guarantee Stamp Here

Association.

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