

## Letter of Instruction Form 800-279-0279

Please use this form to change your Davis Fund account options or provide general instructions. All shareholders must also complete Section C (Signatures) before any changes will be made; some changes will require a medallion guarantee. Please return this form to: Davis Funds, PO Box 219197, Kansas City, MO 64121-9197. For overnight delivery: Davis Funds, 430 W 7th Street, Suite 219197, Kansas City, MO 64105-1407.

A. ACCOUNT INFORMATION						
				<u> </u>		
Name of Shareholder (Please Print)				Social Security Nun	nber	
Name of Joint Shareholder (if any)				Social Security Num	nber	
Fund Number(s)		Account Number	count Number		Daytime Telephone Number	
B. PLEASE WRITE INSTRUCTION	NS IN BOX BELOW					
C. SIGNATURE(S) - ALL SHARE	HOLDERS MUST CO	MPLETE THIS SECTIO	N			
All shareholders listed on the current ac responsibility to read the current prosper						
form; I agree to release Davis Funds, Sta	ate Street Bank & Trust, U	MB Bank, the transfer age	nt, their affiliates and agents from	m all liability and will indemnify the	m for any losses,	
damages or costs (including reasonable transactions; 4) If a trustee, executor, ad						
capacity following the signature. Please	e call our Investor Service	es Department for details r	egarding Proof of Capacity and	d certification requirements; 5) I u	nderstand that some	
privileges require a medallion guarantee the medallion guarantee information be			e their original signatures meda	illori guaranteed by an eligible gua	iranior. Flease review	
Signature of Shareholder	Date	-	Signature of Shareholder	Date	-	
Signature of Shareholder	Date		Signature of Shareholder	Date		
Title Capacity (i.e. Trustee, executor, etc.)			Title Capacity (i.e. Trustee, executor, etc.)			
	,			. ,		
Place Medallion Guarantee Here			Place Medallion	n Guarantee Here		