



Checkwriting Privilege Form

Please use a pen and print clearly in CAPITAL LETTERS.

Use this form to take advantage of the Nationwide Money Market Fund Check Writing Privilege

Terms and Conditions

The account holder(s) whose signature(s) appear(s) on this form in the section below intending to be legally bound, hereby agree(s) with Nationwide Funds as follows:

1. The payment of funds is authorized by the signature(s) appearing in the section below. Nationwide Funds is hereby appointed agent by the person(s) signing the signature card and will cause to be redeemed a sufficient number of shares from the Nationwide Money Market Fund Prime Shares account in order to cover checks presented for payment without requiring a medallion signature guarantee.
2. Nationwide Funds and the Nationwide Money Market Fund Prime Shares will not be liable for any loss, expense or cost arising out of check redemptions or checks returned without payment.
3. Shares outstanding in the account for less than 10 business days will not be liquidated to pay checks presented unless Nationwide Funds is assured that good payment has been collected through normal banking channels.
4. Nationwide Funds has the right not to honor checks that are written for less than \$500 or checks written for an amount exceeding the value of the account at the time the check is presented.
5. If the checkwriting privilege is established after the opening of the Nationwide Money Market Fund account or if any information concerning the privilege is changed, Nationwide Funds will require a medallion signature guarantee.

Checkwriting Signature Card

Nationwide Funds

All account holders must sign this card. The account holder(s) will receive a supply of checks within approximately three weeks after Nationwide Funds receives your completed form. Please note that each check must be written for a minimum amount of \$500.

How many signatures are required to authorize the checks? _____

(If no number is provided, Nationwide Funds will require only one signature on the checks.)

Important: By signing the signature card, the undersigned agree(s) to be subject to the terms and conditions of Nationwide Funds listed above and as amended from time to time. Please sign using black ink.

Account Holder Signature

Joint Account Holder Signature

Print Name

Print Name

Date (mm/dd/yyyy)

Date (mm/dd/yyyy)

Nationwide Money Market Fund Account Number

Daytime Phone

For assistance in completing this form, call 800-848-0920. Send completed forms to:

Mail:
Nationwide Funds
P.O. Box 701
Milwaukee, WI 53201-0701

Overnight Services:
Nationwide Funds
615 E. Michigan St., FL3
Milwaukee, WI 53202-5207