

Mutual Fund 457(b) Enrollment Form

Group ID# 65686001 CS: D

This Enrollment Form should be used for initial enrollment and contribution allocation only. Future investment election changes may be made by calling VALIC Retirement Services Company at 1-800-448-2542 or by going online at www.valic.com. Investment election changes via paper forms will not be accepted.

1. CLIENT INFORMATION

Name: _____ SSN or Tax ID: _____

Mr. Mrs. Ms. Dr. Rev.

Gender: Male Female Marital Status: Married Not Married Date of Birth: _____

Residence Address*: _____

City: _____ State: _____ ZIP: _____

Home Phone: (____) _____ Work Phone: (____) _____ Other Phone: (____) _____

Mailing Address* (If different from above): _____

City: _____ State: _____ ZIP: _____

*All accounts will be updated with these addresses.

Date of Hire: _____

2. INVESTMENT ELECTIONS

Indicate investment elections below for all future contributions to the Plan. Use whole increments of 1% (no fractions) to total 100%.

- | | |
|-------------------------------------------------------|------------------------------------------------------|
| _____ % AIM Developing Markets I (GTDIX) | _____ % Dreyfus MidCap Index (PESPX) |
| _____ % AmCent Inf-Adj Bond Inv (ACITX) | _____ % Dreyfus S&P 500 Index (PEOPX) |
| _____ % Amer Fund Cap WrldGI R3 (RWICX) | _____ % Dreyfus Sm Cap Stk Indx (DISSX) |
| _____ % Amer Funds Amer Bal R3 (RLBCX) | _____ % Fixed-Interest Option (FIXED17) ² |
| _____ % Amer Funds Amer HI R3 (RITCX) | _____ % JP Morgan Capital Gr A (VCAGX) |
| _____ % Amer Funds EuroPac R3 (RERCX) ¹ | _____ % JP Morgan Small Cap Gr A (PGSGX) |
| _____ % Amer Funds Grth Fund R3 (RGACX) | _____ % PIMCO Total Ret A (PTTAX) |
| _____ % American Beacon LgCVI Pln (AAGPX) | _____ % Phoenix REal Estate Sec A (PHRAX) |
| _____ % American Century CP Pres Inv (CPFXX) | _____ % T. Rowe Price Rtmt 2010 R (RRTAX) |
| _____ % Artisan Mid Cap Value (ARTQX) | _____ % T. Rowe Price Rtmt 2020 R (RRTBX) |
| _____ % Columbia Sm Cap Value II A (COVAX) | _____ % T. Rowe Price Rtmt 2030 R (RRTCX) |
| _____ % Davis NY Venture A (NYVTX) | _____ % T. Rowe Price Rtmt 2040 R (RRTDX) |
| _____ % Dreyfus Bond Mkt Idx Inv (DBMIX) | _____ % T. Rowe Price Rtmt Inc R (RRTIX) |
| _____ % Dreyfus Intl Stock Index (DIISX) ¹ | 100% Total |

¹ International fund unit value and returns will fluctuate with market conditions, currencies, and the economic and political climate where investments are made.

² Policy Form GFUA-398, a fixed annuity issued and VALIC Guaranteed by The Variable Annuity Life Insurance Company, Houston, Texas.

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3. DOCUMENT DELIVERY CHOICES

E-mail Address: _____

By providing my e-mail address above, I elect to enroll in Personal Deliver-e®, VALIC's electronic document delivery service

Electronic delivery is a free service though you may pay Internet service provider fees to access the Internet or receive e-mails. VALIC Retirement Services Company will send e-mail notices when transaction confirmations and account statements are available for viewing and/or printing online.

I elect to continue receiving account information and related materials in a printed format.

4. CLIENT SIGNATURE

I understand that transfers from the Fixed-Interest Option may be restricted. I understand that mutual fund investment return and principal value will fluctuate so that when redeemed any shares in my Plan account may be worth more or less than their original cost. I affirm that the information on this form is accurate and complete, to the best of my knowledge.

Client Signature

Date

Signed At: City/State

UPON COMPLETION OF THIS FORM, A DEFERRED COMPENSATION AGREEMENT AND A BENEFICIARY DESIGNATION FORM MUST BE SUBMITTED WITH THIS DOCUMENT TO VALIC RETIREMENT SERVICES COMPANY.

Please fax this form and any documentation to 1-877-202-0187 or mail to the address below for processing:

VALIC Document Control
P.O. Box 15648
Amarillo, TX 79105-5648

If overnight delivery: VALIC Retirement Services Company
2271 S.E. 27th Avenue
Amarillo, Texas 79103

Questions about this form may be directed to 1-800-448-2542, Monday through Friday, 7 a.m. - 8 p.m. Central Time.

For Home Office Use Only

Financial Advisor Name (Print)

Financial Advisor Signature

Date

Agent #: _____

Region Code: _____