

AUTO-EXCHANGE AUTHORIZATION FORM

Dreyfus Auto-Exchange allows you to have a specified dollar or share amount exchanged automatically from one of your Dreyfus fund accounts to another one or more of your other Dreyfus fund accounts. Exchanges can be made automatically semi-monthly, monthly, quarterly, semi-annually or annually.

This Auto-Exchange Privilege is only available for existing accounts, and cannot be used to open a new account. For more information, including those Funds eligible to participate, please call your financial representative or check your Fund's prospectus.

Please Print All Items Except Signatures

PLEASE EXCHANGE FROM (You may list only **one** "FROM" account on each form):

Name of Dreyfus Mutual Fund Mutual Fund Account Number

Name(s) of Registered Owner(s) on Your Dreyfus Account

Street Address

City State Zip Code

Please check this box if you would like to update the address on your account to the above. Please note P.O. boxes are not allowed. For additional information, please call the number on your account statement.

() Telephone Number Taxpayer Identification Number on Account

TO:

Name of Dreyfus Mutual Fund Mutual Fund Account Number

EXCHANGE AMOUNT:

\$ _____ or _____ shares
Dollar Amount (minimum of \$100) Number of Shares (minimum current value of \$100)

FREQUENCY OF EXCHANGE (Please check only **one** box):

Semi-monthly Monthly Quarterly Semi-annually Annually

Starting month _____ Date(s) _____

AND TO: Complete this section *only* if you are requesting an Auto-Exchange to an additional Fund account.

Name of Dreyfus Mutual Fund Mutual Fund Account Number

EXCHANGE AMOUNT:

\$ _____ or _____ shares
Dollar Amount (minimum of \$100) Number of Shares (minimum current value of \$100)

FREQUENCY OF EXCHANGE (Please check only **one** box):

Semi-monthly Monthly Quarterly Semi-annually Annually

Starting month _____ Date(s) _____

AUTO-EXCHANGE AUTHORIZATION FORM

PLEASE SIGN HERE:

Individual/Custodian/Trustee/Corporate Officer/Partner, etc.

Joint Owner (if any)/Second Trustee, Corporate Officer, Partner, etc.

Title/Capacity

Date

Title/Capacity

Date

FOR NOTARY PUBLIC USE ONLY:

Sworn to (or affirmed) before me this
_____ day of _____, 20____

(Notary Signature)

My commission expires _____ (Affix seal)

FOR NOTARY PUBLIC USE ONLY:

Sworn to (or affirmed) before me this
_____ day of _____, 20____

(Notary Signature)

My commission expires _____ (Affix seal)

NOTARY REQUIRED

- If your “FROM” account registration is different than the “TO” account registration.
- Each account owner’s signature on the “FROM” account must be notarized.
- If you are using this form to update your address and your account has a stop mail.

To cancel the Auto-Exchange Privilege, you may notify the Transfer Agent in writing; to select a new fund, you may cancel and file a new Auto-Exchange Authorization Form with the Transfer Agent at the address listed below. Enrollment in or cancellation of the Auto-Exchange Privilege is effective three business days after the Transfer Agent receives the appropriate notification.

Mail this completed Auto-Exchange Authorization form to:

Dreyfus Institutional Department
P.O. Box 9882
Providence, RI 02940-8082

Send registered, certified or overnight mail to:

Dreyfus Institutional Department
4400 Computer Drive
Westborough, MA 01581

An Auto-Exchange is treated as a sale of the exchanged shares for federal income tax purposes. Payments directed to retirement programs from non-retirement accounts are deemed current year contributions.