

This form should be used to redeem, exchange or transfer title of shares in your account. For more information, please call your financial representative.

**FOR VALUE RECEIVED, \_\_\_\_\_ HEREBY:**  
(I, WE)

**1. CURRENT ACCOUNT INFORMATION**

These shares are registered in the name of \_\_\_\_\_  
CURRENT ACCOUNT REGISTRATION

on the books of said Fund under said account number and I(we) do hereby irrevocably constitute and appoint Dreyfus Transfer, Inc., the Fund's Transfer Agent, as its attorney to transfer the said shares on the books of the within named Fund with full power of substitution in the premises.

\_\_\_\_\_  
FUND NAME ACCOUNT NUMBER

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
CITY STATE ZIP CODE

( ) \_\_\_\_\_  
PHONE NUMBER TAXPAYER IDENTIFICATION NUMBER

**2. REDEEM BY (SELECT ONE):**

**Check**

\_\_\_\_\_  
MADE PAYABLE TO:

\_\_\_\_\_  
ADDRESS

\_\_\_\_\_  
CITY STATE ZIP CODE

OR

**Wire**       **ACH**

(If you select wire transfer or ACH, please attach a voided check.)

\_\_\_\_\_  
BANK NAME AND ABA NUMBER

\_\_\_\_\_  
NAME(S) ON BANK ACCOUNT

\_\_\_\_\_  
BANK ADDRESS

\_\_\_\_\_  
BANK ACCOUNT NUMBER

**3. EXCHANGE TO:**

\_\_\_\_\_  
FUND NAME

\_\_\_\_\_  
ACCOUNT NUMBER (IF NOT A NEW ACCOUNT)

**4. TRANSFER TO (PLEASE NOTE: TRANSFER MUST BE MADE WITHIN THE SAME FUND):**

ACCOUNT REGISTRATION \_\_\_\_\_

ACCOUNT NUMBER \_\_\_\_\_

JOINT TENANCY WITH RIGHTS OF SURVIVORSHIP WILL BE PRESUMED UNLESS OTHERWISE INDICATED

ADDRESS \_\_\_\_\_

CITY \_\_\_\_\_

STATE \_\_\_\_\_

ZIP CODE \_\_\_\_\_

If you wish to change your registration using this form, please return the form with a new The Dreyfus Family of Funds Account Application. To obtain the The Dreyfus Family of Funds Account Application, please call your financial representative.

**5. AMOUNT (SELECT ONE):**

Dollar amount \$ \_\_\_\_\_ **OR**  \_\_\_\_\_ shares **OR**  Full shares  
(NUMBER)

**6. SIGNATURES  
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 \_\_\_\_\_

**7. MEDALLION SIGNATURE GUARANTEE**

Place Medallion Signature Guarantee stamp here.

MEDALLION SIGNATURE GUARANTEE

The Transfer Agent has adopted standards and procedures pursuant to which Medallion Signature Guarantees in proper form generally will be accepted from domestic banks, brokers, dealers, credit unions, national securities exchanges, registered securities associations, clearing agencies and savings associations participating in the New York Stock Exchange Medallion Signature Program (MSP), the Securities Transfer Agents Medallion Program (STAMP) and the Stock Exchanges Medallion Program (SEMP). Notarization by a Notary Public is not an acceptable guarantee.

For first class mail please mail to: Dreyfus Institutional Department  
 P.O. Box 9882  
 Providence, RI 02940-8082

For registered, certified or overnight mail, please mail to:  
 Dreyfus Institutional Department  
 4400 Computer Drive  
 Westborough, MA 01581