

Introduction

Instructions

Please use this form to establish a new Manulife John Hancock Investments account in Class R6 shares. Please print in all capital letters and use black ink.

Special considerations

Shares of a fund generally may be sold only to U.S. citizens, U.S. residents, and U.S. domestic corporations, partnerships, trusts, or estates. For the purpose of this policy, both the residential address and the mailing address provided must be U.S. addresses. We're unable to establish your account using a foreign address.

Contact us



Website

jhinvestments.com



Phone

800-225-5291



Return instructions

See the end of this form for return instructions.

1. Fund selection

Please select the fund(s) and the amount you would like to invest. The minimum initial investment is \$1,000,000; the minimum is waived for qualified retirement plans. Please use this application for Class R6 shares only. Checks must be made payable to **John Hancock Signature Services, Inc.** We cannot accept starter or third-party checks.

_____	\$ _____	_____	\$ _____
Fund name	Initial investment amount	Fund name	Initial investment amount
_____	\$ _____	_____	\$ _____
Fund name	Initial investment amount	Fund name	Initial investment amount

2. Account information

Select the type of account you wish to establish by completing Section A or B. Print your name/entity name as shown on your tax return.

Section A

- Individual/sole proprietor or single-member LLC
 C corporation
 S corporation
 Partnership
 Foundation or endowment
 LLC taxed as C corporation
 LLC taxed as S corporation
 LLC taxed as partnership
 Retirement plan*
 Nominee or trust company
 Unincorporated association
 Other (e.g., nonprofit, charity) _____

* If you checked "Retirement plan," please indicate if this is a:
 401(k)
 Profit-sharing plan
 Money purchase plan
 Defined benefit plan
 Other _____

If more space is needed for additional owners, please make a copy of this page and attach it to your application.

Name of trust company, corporation, partnership, or plan

_____ Trustee, plan administrator, or authorized signer's name (First)	_____ (MI)	_____ (Last)	_____ (Suffix)
_____ Authorized cosigner's name (First)	_____ (MI)	_____ (Last)	_____ (Suffix)

Taxpayer identification number (Required)

_____ For benefit of (If applicable) (First)	_____ (MI)	_____ (Last)	_____ (Suffix)
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Beneficial owner's Social Security number

Additional documentation for corporations, partnerships, and retirement plans

To help the government fight the funding of terrorism and money laundering activities, the *USA Patriot Act of 2001* requires all financial institutions to obtain, verify, and record information that identifies each person or entity that opens an account. Additional documentation is required for the account types listed below. **We'll be unable to establish your account without this required documentation.**

Corporation or partnership

- A copy of the articles of incorporation, state-issued charter, certificate of good standing or partnership agreement
 A completed Manulife John Hancock Investments business/organization certification form, and
 A completed Manulife John Hancock Investments legal entity beneficial ownership certification form.

Retirement plan

- A copy of the entire plan document that pertains to the plan you're establishing, unless it has been previously provided.

Nonprofit, foundation or endowment

- A completed Manulife John Hancock Investments legal entity beneficial ownership certification form.

2. Account information (continued)

Section B

Individual, joint, or gift/transfer to a minor

(Only available to fund trustees and other individuals who are affiliated with these funds or other Manulife John Hancock Investments mutual funds.)

Fund affiliation: Manulife John Hancock Investments employee Trustee Other (Please specify) _____

Individual or Joint account

Owner's name (First) _____ (MI) _____ (Last) _____ (Suffix) _____

Social Security number (Required) _____ Date of birth (MM/DD/YYYY) _____

Joint owner's name (First) _____ (MI) _____ (Last) _____ (Suffix) _____

Joint owner's Social Security number (Required) _____ Date of birth (MM/DD/YYYY) _____

Joint accounts will be registered as joint tenants with rights of survivorship (JT WROS).

Joint accounts in Louisiana will be registered as tenants in common (TEN COM) unless otherwise indicated on this line: _____

Gift/transfer to a minor (UGMA/UTMA)

Custodian's name (First) _____ (MI) _____ (Last) _____ (Suffix) _____

Custodian's Social Security number _____ Custodian's date of birth (MM/DD/YYYY) _____

Minor's name (First) _____ (MI) _____ (Last) _____ (Suffix) _____

Minor's Social Security number _____ Donor's state _____ Minor's date of birth (MM/DD/YYYY) _____

Cost basis reporting method

The Internal Revenue Service (IRS) requires mutual fund companies to track the cost basis for certain mutual fund shares acquired on or after January 1, 2012, and report that cost basis to shareholders and the IRS. We'll apply the default cost basis reporting method of average cost to all applicable funds and accounts that are subject to IRS Form 1099-B reporting. Average cost for an account is calculated by adding up the cost of all covered purchases in the account (purchases made on or after January 1, 2012) and dividing that total by the number of covered shares in the account. Under this method, shares will be redeemed in a first-in, first-out order, but the cost basis for all shares will be the calculated average cost. If you don't wish to use the average cost method for your covered shares, you may select another method by completing and returning a cost basis election form or by accessing your account on our website at jhinvestments.com. We encourage you to consult with your legal and/or tax advisor to determine which accounting method is best for you. Manulife John Hancock Investments cannot offer tax advice.

3. Address (All information is required)

Note: Both the residential address and the mailing address provided must be U.S. addresses. We're unable to establish your account using a foreign address.

Residential address or principal place of business (No P.O. boxes except A.P.O. or F.P.O. boxes)

Street address/A.P.O. or F.P.O. box/apt. # _____

City _____ State _____ Zip code _____

Phone number _____ Home Mobile _____ Email address _____

Go paperless

I consent to receiving electronic delivery of account documents as described below:

By checking the box above, I consent to receiving electronic delivery of Manulife John Hancock Investments mutual fund and account documents, notices, and communications, including, but not limited to, confirmation and quarterly account statements, tax information and notices, annual/semiannual reports, prospectuses, and other required and informational notices (account documents) instead of in paper form by regular mail. My consent will remain in effect until revoked. I understand that Manulife John Hancock Investments will send me an email when account documents are available for viewing, downloading, and printing. Each email will provide a link to jhinvestments.com, which will allow me to access my account documents online. Accessing account documents online requires minimum technical requirements, including (i) access to the internet, (ii) a valid email address, and (iii) installation of Adobe Acrobat Reader on my computer. (Adobe Acrobat Reader can be downloaded, free of charge, at adobe.com.) I understand that no confidential data will be sent through email, and Manulife John Hancock Investments doesn't charge a fee for providing electronic documents; however, I may incur internet access charges, telephone charges, and other third-party charges when receiving electronic documents or downloading the required software. I understand that I can receive a free paper copy of account documents, revoke my consent and/or update my email address at any time by calling 800-225-5291 or by visiting jhinvestments.com.

Mailing address (If different from above)

Street address/A.P.O., F.P.O., or P.O. box/apt # _____

City _____ State _____ Zip code _____

4. Dividends and capital gains

If you don't make a selection, dividends and capital gains will be reinvested.

Dividends: Reinvest Cash

Capital gains: Reinvest Cash

Reinvest my dividends from my Manulife John Hancock Investments _____ fund to my _____ fund. (Must be the same class of shares.)

Send all dividends directly to my bank. (You must complete Section 7.)

Send all dividends directly to my address of record.

5. Financial intermediary and/or planner information (If applicable)

Investment professional name (First) _____ (MI) _____ (Last) _____

Firm name (If applicable) _____

Firm name (If applicable) _____

City _____ State _____ Zip code _____

Branch/agency number (If applicable) _____ Investment professional number (If applicable) _____ Phone number _____

**SIGN
HERE**

Investment professional signature _____

Date signed (MM/DD/YYYY) _____

6. John Hancock contact (if applicable)

Client relationship manager

Name _____

Address _____

City _____ State _____ Zip code _____

Phone number _____ Email address _____

7. Bank Information

Attach a voided check or bank deposit slip, preprinted with your account information, if you would like the ability to move money between your bank account and your mutual fund account in the future. The bank information will be added to all mutual fund accounts found under the Social Security numbers provided in Section 2. For security purposes, the bank account should match the name(s) provided in Section 2 and must be in place at least 15 calendar days before it can be used for an outgoing wire. If another individual exists on your bank account or the bank account belongs to a third party, all parties should complete the adding bank information form found at jhinvestments.com.

Establish the service(s) between my fund account and my: Checking account NOW/money market/savings account

By signing below, I authorize you to charge to my account checks made payable to the order of John Hancock Signature Services, Inc. I'm aware that your rights with respect to each check shall be the same as if I had signed the check personally and drawn it on John Hancock Signature Services, Inc. This authority is to remain in effect until I revoke it in writing, and until you actually receive such notice, I agree that you shall be fully protected in honoring the check. If any check should be dishonored, whether with or without cause and whether intentionally or inadvertently, you shall be under no liability whatsoever.

I'm providing written permission for John Hancock Signature Services, Inc. to obtain a consumer report about me as part of its process to authenticate my identity and to protect against fraud. This consumer report will be used solely to validate that I'm an authorized holder, user, or signatory of the account used or to be used in connection with the current or future transfer of funds. John Hancock Signature Services, Inc. will notify me if any adverse action is taken on the basis of such a report.

8. Signature, taxpayer identification number, and certification

Note: All account owners must sign and enter their taxpayer identification number below. Your account cannot be established without this required information.

I acknowledge that identifying information is required before the account can be opened and is subject to verification by my financial professional, the fund, or the fund's agents. If verification is unsuccessful, Manulife John Hancock Investments may close my account, redeem my shares at the next net asset value, minus any applicable sales charges, and take other steps that it deems reasonable.

8. Signature, taxpayer identification number, and certification (continued)

I understand that under certain circumstances, if no activity occurs in my account within a time period specified by state law, my shares may be transferred to the appropriate state.

Note: The rules for transferring abandoned property vary state by state, so we suggest you contact your state's department of abandoned property if you have any questions regarding requirements.

I'm of legal age and acknowledge that I've received and read the prospectus for each fund that I've selected.

Certification required of U.S. persons only (including U.S. citizens, U.S. resident aliens, or other U.S. persons)

Under penalties of perjury, I certify that:

1. The number shown below is my correct taxpayer identification number.
2. I'm not subject to backup withholding because: (a) I'm exempt from backup withholding, or (b) I haven't been notified by the Internal Revenue Service (IRS) that I'm subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I'm no longer subject to backup withholding.
3. I'm a U.S. citizen or other U.S. person, including a U.S. resident alien (as defined in the IRS Form W-9 instructions).

Note: Cross out item 2 above if you've been notified by the IRS that you're currently subject to backup withholding because you've failed to report all interest and dividends on your tax return.

Please note that, by signing this form, you declare that you make the above certifications under penalties of perjury. Under penalties of perjury, I certify the above statements.

The IRS doesn't require your consent to any provision of this document other than the certification required to avoid backup withholding.

SIGN
HERE

Signature of owner, custodian, trustee, or organization representative
(Sign exactly as name appears in Section 2)

Date signed (MM/DD/YYYY)

PRINT
HERE

Print name as shown in Section 2 (For UGMA/UTMA accounts
print the minor's name; for entity accounts, print the entity name)

PRINT
HERE

Social Security number/EIN
(Required to establish your account. For UGMA/UTMA accounts
enter the minor's SSN. For entity accounts, enter the entity's EIN)

SIGN
HERE

Signature of joint owner, custodian, trustee, or organization representative
(Sign exactly as name appears in Section 2)

Date signed (MM/DD/YYYY)

PRINT
HERE

Print name as shown in Section 2

PRINT
HERE

Social Security number/EIN

If more space is needed for additional signatures, please make a copy of this page and attach it to your application.

9. Mail

Please enclose and mail to:



Regular mail

John Hancock Signature Services, Inc.
P.O. Box 219909
Kansas City, MO 64121-9909

Express mail

John Hancock Signature Services, Inc.
801 Pennsylvania Avenue
Suite 219909
Kansas City, MO 64105-1307



John Hancock Investment Management Distributors LLC, Member FINRA, SIPC
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