

ADDITIONAL INVESTMENT FORM

SECTION 1: Account Information

Account Number _____

Owner's Name (Last, First, Middle Initial) _____

Owner's Social Security Number _____

Date of Birth (MM/DD/YY) _____

Joint Owner's Name (Last, First, Middle Initial) (if applicable) _____

Joint Owner's Social Security Number _____

Date of Birth (MM/DD/YY) _____

Address of Residence - (P.O. Box is not accepted) _____

City, State, Zip Code _____

Mailing Address - If different from above (P.O. Boxes accepted) _____

City, State, Zip Code _____

(_____) _____
Day Phone

(_____) _____
Evening Phone

E-mail Address

SECTION 2: Investment Selection

How would you like to make your investment?

- Check** - Make your personal check payable to the James Advantage Funds and enclose with this form. We do not accept third party checks (see prospectus for acceptable method of payment).
- Electronically** - Make a one-time withdrawal from the bank account on record for the amount indicated below.

NOTE: To add or modify bank instructions please complete the Bank Information section on the Account Options form. Adding or modifying banking instructions requires a Signature Guarantee.

| Fund Name | Fund Number | Ticker | Amount | or | Percent | % |
|--------------------------------------|-------------|--------|-----------------|----|------------|----------|
| The Golden Rainbow Fund | 11004 | GLRBX | \$ _____ | | _____ | % |
| The James Small Cap Fund | 11003 | JASCX | \$ _____ | | _____ | % |
| The James Micro Cap Fund | 11007 | JMCRX | \$ _____ | | _____ | % |
| The James Aggressive Allocation Fund | 11009 | JAVAX | \$ _____ | | _____ | % |
| Total | | | \$ _____ | | 100 | % |

Tax Year (IRA Accounts Only) _____

This form may not be used to elect a cost basis method or make changes to the cost basis method on your account. The cost basis of covered shares is determined using Average Cost, unless you have elected a different accounting method. To elect a different method, please complete a Cost Basis Election form or submit a letter of instruction. Non-covered shares are redeemed prior to covered shares unless otherwise specified at the time of the redemption.

Please mail completed form to:

Mailing Address

James Advantage Funds
P.O. Box 786
Denver, CO 80201-0786

Overnight Address

James Advantage Funds
1290 Broadway, Suite 1000
Denver, CO 80203

If you have any questions, please contact an Investor Service Representative at 1-800-99JAMES (52637) or visit www.jamesfunds.com.