

DIRECT STOCK PURCHASE PLAN INITIAL INVESTMENT FORM

America's Car Mart, Inc.

PLEASE BE SURE TO COMPLETE AND SIGN THIS FORM.

D. SIGNATURES

By signing this form, I request enrollment, certify that I have received and read the prospectus describing the America's Car Mart, Inc. Direct Stock Purchase Plan and agree to abide by the terms and conditions of the Plan. I hereby appoint Securities Transfer Corporation as my agent to apply dividends and any Investments I may make to the purchase of shares under the Plan. I understand that I may revoke this authorization at any time by written notice to Securities Transfer Corporation.

All joint owners must sign. _____

Under penalties of perjury, I also certify that: A. The number shown on this form is my/our correct Social Security Number or Taxpayer ID Number. B. I am not subject to backup withholding either because (1) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (2) the IRS has notified me that I am no longer subject to backup withholding.

(Check this box If you have been notified by the IRS that you are subject to backup withholding because of underreporting of interest or dividends on your tax returns.

E. ADDITIONAL PROGRAM FEATURES

Listed below are many features of the Plan. Be sure to refer to the prospectus for complete information about all of the options. Please check any boxes that apply and we will mail more information to you promptly.

- GIFTS.** Please send me information and a Gift/Transfer Form. I am interested in making gifts of America's Car Mart, Inc. through the Plan.
- AUTOMATIC INVESTMENT.** You may choose to make investments in America's Car Mart, Inc. stock by authorizing automatic debits from your U.S. personal bank account. To activate this feature of the Plan, please complete sections F and G below.

F. BANK ACCOUNT INFORMATION

- Checking Savings

Please attach a voided check or savings account deposit slip for account verification. If you do not have a voided check and the account you are indicating is either a savings or credit union account, it is important you have a financial representative verify the information prior to returning this form.

Name of Financial Institution

ABA Routing Number

Bank Account Number

Bank Telephone

Mailing Address of Financial Institution

City

State

Zip

G. AUTHORIZATION

I hereby authorize Securities Transfer Corporation and the U.S. Financial Institution indicated in Section F to deduct from my bank account.

\$ _____ per month (\$25 minimum)

and to apply amounts so deducted to the purchase of America's Car Mart, Inc. stock under The Plan for the account designated in Section D. (Note: Deductions will occur one banking day prior to the second investment date of each month.)

Bank Account Owner's Signature

Date

QUESTIONS? Call 469-633-0101 from 8:30 a.m. to 5:00 p.m. Central Time Monday through Friday