

# IRA CHANGE OF ACCOUNT INFORMATION

For assistance, please contact an Investor Services Representative at 800-332-5580.

## Current Account Information (Must be completed)

Name on Account

Social Security Number

Account Number(s)

## Change of Address

Please indicate old and new address.

### Old Address:

Street Address

City, State, Zip

### New Address:

Street Address

City, State, Zip

## Change of Name

Please indicate old and new name and reason for name change. Send a copy of official documents such as a marriage certificate along with this form.

Old Name

New Name

Write reason for name change on the following lines:

## Change of Beneficiary Designation

Check a box to change a Primary or Secondary Beneficiary. Secondary Beneficiaries receive distributions only if there are no surviving Primary Beneficiaries.

### Primary Beneficiaries:

1.

Name on Account

Address

City, State, Zip

Social Security Number

Birth Date

Relationship

% of Distribution

2.

Name on Account

Address

City, State, Zip

Social Security Number

Birth Date

Relationship

% of Distribution

### Secondary Beneficiaries:

1.

Name on Account

Address

City, State, Zip

Social Security Number

Birth Date

Relationship

% of Distribution

