

Brighter Future Advisor Plan **Account Information Change Form**



- The following can be changed by completing this form: account owner's name, mailing address, phone number, email address, successor account owner, interested party, or financial advisor information.
- If you are changing your name, your former signature and your new signature must be guaranteed in **Section 8** by an authorized officer of a bank, broker, or other qualified financial institution.
- If you are changing the account owner of an existing account, your signature must be guaranteed in **Section 8** by an authorized officer of a bank, broker, or other qualified financial institution and the new account owner must attach an Account Application.
- Print clearly, preferably in capital letters and black ink.

Forms can be downloaded from our website at **www.BrighterFutureAdvisor529.com**, or you can call us to order any form – or request assistance in completing this form at **1.888.529.9552** any business day from 8:30 a.m. to 6:30 p.m. ET.

<p>Mail this form and any other required documents to:</p> <p>Brighter Future Advisor Plan P.O. Box 219700 Kansas City, MO 64121-9700</p>	<p>For overnight delivery or registered mail, send to:</p> <p>Brighter Future Advisor Plan 1001 E 101st Terrace, Suite 200 Kansas City, MO 64131</p>
--	---

1. Current Account Owner Information

–

–

–

Account Number(s) (To list more than three accounts, use a separate sheet)

– –

Social Security Number or Taxpayer Identification Number

Name of Account Owner (first, middle initial, last)

– –

Daytime Telephone Number

– –

Evening Telephone Number

Permanent Street Address (A P.O. Box or rural route number are **not** acceptable.)

City

State

–

Zip Code



* A R A D V A C C T I N F O C H G *

2. Updated Account Owner Information (If applicable)

- If you are changing your contact information, provide the new information exactly as you would like it to appear on your Brighter Future Advisor Plan account.
- If you are changing your name, you must provide a Signature Guarantee in **Section 8**.

Name of Account Owner (first, middle initial, last)

Daytime Telephone Number

Evening Telephone Number

E-mail Address

Permanent Street Address (A P.O. Box or rural route number are **not** acceptable.)

City

State

Zip Code

Account Mailing Address if different from above (This address will be used as the account's address of record and for all account mailings.)

City

State

Zip Code

3. Transfer Assets to New Account Owner (If applicable)

- This will transfer ownership of all of the assets on the referenced account to the new account owner listed below.
- The new account owner will control the account and the disposition of all assets held in the account.
- The new account owner must also complete an **Account Application**.

Account Number (if applicable)

Name of New Account Owner (first, middle initial, last)

Social Security Number or Taxpayer Identification Number

Birth Date/Trust Date (mm/dd/yyyy)

7. Signature — YOU MUST SIGN BELOW *However, if you are changing your name or transferring ownership of your account to a new account owner, skip this section and complete **Section 8** instead.*

I certify that the information provided herein is true and complete in all respects.

➤ SIGNATURE

Signature of Account Owner

□□ – □□ – □□□□
Date (mm/dd/yyyy)

8. Signature Guarantee – REQUIRED FOR NAME AND ACCOUNT OWNER CHANGES ONLY

- You must provide the following information as underwritten certification that your new signature is genuine.
- You can obtain a Signature Guarantee from an authorized officer of a bank, broker, or other qualified financial institution. *A notary public cannot provide a Signature Guarantee, nor can you guarantee your own signature.*
- **Do not sign below until you are in the presence of the authorized officer providing the Signature Guarantee.**

I certify that the information provided herein is true and complete in all respects.

➤ SIGNATURE

Sign here for account owner change

□□ – □□ – □□□□
Date (mm/dd/yyyy)

➤ SIGNATURE

New Signature of Account Owner

□□ – □□ – □□□□
Date (mm/dd/yyyy)

➤ SIGNATURE

Signature of Guarantor

Title/Name of Institution

□□ – □□ – □□□□
Date (mm/dd/yyyy)

Authorized Officer to Place Stamp Here