

CollegInvest Direct Portfolio College Savings Plan Account Information Change Form



- You can change your mailing address, phone number, e-mail address, successor account owner, or interested party information by accessing your account online at **www.collegeinvest.org**.
- Complete this form to change the account owner or the name, mailing address, phone number, e-mail address, successor account owner, or interested party information on your account.
- If you're changing your name, your former signature and new signature must be guaranteed in **Section 8** by an authorized officer of a bank, broker, or other qualified financial institution.
- **Important:** If you're changing the owner of an existing account, you must provide the account number(s) in **Section 1**. You must also submit an Enrollment Application completed and signed by the new account owner listed in **Section 4**.
- Print clearly, preferably in capital letters and black ink.

You can download forms from our website at **www.collegeinvest.org**. Or you can call us to order any form at **800-997-4295** Monday through Friday from 6 a.m. to 7 p.m., Mountain time. Return this form in the enclosed postage-paid envelope or mail to: **CollegInvest Direct Portfolio College Savings Plan, P.O. Box 219931, Kansas City, MO 64121-9931**. For overnight delivery or registered mail, send to: **CollegInvest Direct Portfolio College Savings Plan, 1001 E 101st Terrace, Suite 200, Kansas City, MO 64131**.

1. Current Account Owner Information

Account Number(s) *(To list more than three accounts, use the space at the bottom of this page.)*

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

Last Four Digits of Social Security Number or Individual Taxpayer ID Number

-- --

Daytime Telephone Number

Evening Telephone Number

2. Information to Be Updated

- Account Owner—Complete **Section 3 or Section 4**
- Successor Account Owner—Complete **Section 5**
- Interested Party—Complete **Section 6**

REMEMBER TO SIGN IN SECTION 8.



CO ACCT INFO

3. Updated Existing Account Owner Information *(if applicable)*

- If you're changing your contact information, provide the new information exactly as you would like it to appear on your Direct Portfolio account.
- If you're changing your name, you must obtain a signature guarantee in **Section 8**.

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

E-Mail Address

 - - - -

Daytime Telephone Number

Evening Telephone Number

Permanent Street Address or APO/FPO *(A P.O. box or rural route number is **not** acceptable.)*

City

State

Zip

Account Mailing Address if Different From Above *(This address will be used both as the account's address of record and for all account mailings.)*

City

State

Zip

4. Transfer Assets to New Account Owner *(if applicable)*

- This will transfer ownership of these assets 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 **Enrollment Application**, unless the new account owner has already established a new account.

Account Number of New Account Owner

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

(Check one.) Full balance to be transferred Partial balance

\$ Amount to be transferred

5. Successor Account Owner Information *(if applicable)*

Complete this section to designate an individual to automatically assume control of your account when you die, or to replace or remove your current successor account owner. You can have only one successor account owner per account, and he or she must be a U.S. citizen or resident alien, and must be at least 18 years of age.

(Check one.) Add Change Remove

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

 / /

Birth Date *(month, day, year)*

6. Interested Party Information (if applicable)

Complete this section if you want additional persons to receive a quarterly statement for the account or if you're changing interested party information on your account. To add or change information for more than one interested party, use a separate sheet.

(Check one.) Add Replace Change current information Remove

Name of Interested Party (first, middle initial, last)

Mailing Address

City

State

Zip

Telephone Number

Relationship

7. Signature

The current account owner must sign below. However, if you're changing your name, skip this section and complete Section 8 instead.

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

➤

Signature of Account Owner (If the account owner is a minor, the designated parent or guardian must sign.)

/ /

Date (month, day, year)

8. One-and-the-Same Signature Guarantee—REQUIRED FOR NAME CHANGES ONLY

- If you're changing your name, your former signature and your new signature must be guaranteed by an authorized officer of a bank, broker, or other qualified financial institution. *A notary public cannot provide a signature guarantee, and you cannot guarantee your own signature.*
- **Do not sign below until you're in the presence of the authorized officer providing the one-and-the-same signature guarantee.**

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

➤

Former Signature of Account Owner

/ /

Date (month, day, year)

➤

New Signature of Account Owner

/ /

Date (month, day, year)

➤

Signature of Guarantor

Title/Name of Institution

/ /

Date (month, day, year)

Authorized Officer to Place Stamp Here

