



LETTER OF DIRECTION
CLIENT CHANGE OF INFORMATION

Fund Company: \_\_\_\_\_ Date: \_\_\_\_\_
Client: \_\_\_\_\_ Account No: \_\_\_\_\_
Address: \_\_\_\_\_ Account Type: \_\_\_\_\_
Fund: \_\_\_\_\_
Intermediary: \_\_\_\_\_

This is your good and sufficient authority to change (please check which one applies):

- Address
Registration
PAC / SWP
Beneficiary Designation
Banking Information
Name Change (old signature and new signature mandatory)

From:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Client Signature

Joint Signature

To:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Representative Witness

Signature Guarantee Stamp

Rep No. 9499-\_\_\_\_\_