

## Change of Information

<b>1 Account Information</b>	
Your Name:	American IRA Account Number:

<b>2 Change of Information</b>		
	OLD Information	NEW Information
Address		
Phone Number		
Mobile		
Fax Number		
Email Address		
Email Address 2		

<b>3 Signature and Acknowledgement</b>
<p>By my signature below, I confirm that I have read and consent to the terms of this document and I further acknowledge that I have read and consent to the terms of the New Account Application, Custodial Agreement (Form 5305, 5305-A, 5305-RA, 5305-SA, 5305-SEP, 5305-C or 5305-EA, as applicable, “collectively referred to as “5305” or 401K Plan Agreement (“Sponsored Plan”) as applicable, Fee Schedule, Account Disclosure Statement and any other documents that govern my Custodial Account or Sponsored Plan, as such documents are currently written, or as they may be amended from time to time, (the “Documents”), which are incorporated by reference herein. (In the event of a conflict between the Documents and the 5305 and/or Sponsored Plan applicable to my Custodial Account, the 5305 or Sponsored Plan shall govern).</p>
<p><b>Print Name:</b> _____</p>
<p><b>Your Signature:</b> _____ <b>Date:</b> _____</p>