



CHANGE OF ADDRESS AUTHORIZATION FORM

INSTRUCTIONS:

- Use this form to change the address on your account(s).
- Please print all items except signatures.
- Please have all registered owners of the accounts to be changed sign in Section 4.
- For shareholders changing their address from a non-U.S. address to a U.S. address please provide a copy of any of the following documents reflecting your new U.S. address: passport, driver's license, voter identity card or one of the following documents dated within three months of this request – current bank account statement or current telephone or utility bill.

- Mail this completed form to:

BNY Mellon Institutional Department
P.O. Box 9882
Providence, RI 02940-8082

- Send registered, certified or overnight mail to:

BNY Mellon Institutional Department
4400 Computer Drive
Westborough, MA 01581

For more information, please call your financial representative.

PLEASE PRINT ALL ITEMS EXCEPT SIGNATURES.

1. PLEASE CHANGE THE ADDRESS ON

The following accounts (please list separately):

Account Number(s)

2. FROM:

Address

_____	_____	_____	()	()
City	State	Zip Code	Phone Number	Cell Phone Number

3. TO:

Mailing Address

_____	_____	_____
City	State	Zip Code

Permanent Residential Address (if different from mailing address)(no P.O. boxes)

_____	_____	_____	()	()
City	State	Zip Code	Phone Number	Cell Phone Number

E-mail Address



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4. SIGNATURE(S):

Please have all registered owners or required authorized signers of all the accounts to be changed sign below. Please note, if an account is registered to more than one person, all registered owners must sign.

By checking this box, I would like to remove the STOP MAIL on the above account(s). I understand that each owner's signature(s) must be Notarized.*

Print Name: _____

Signature: _____
Individual/Custodian/Trustee/Corporate Officer/Partner, etc.

Title/Capacity Date

Print Name: _____

Signature: _____
Joint Owner (if any)/Second Trustee, Corporate Officer, Partner, etc.

Title/Capacity Date

FOR NOTARY PUBLIC USE ONLY:

Sworn to (or affirmed) before me this
_____ day of _____, 20__

(Notary Signature)

My commission expires _____ (Affix seal)

FOR NOTARY PUBLIC USE ONLY:

Sworn to (or affirmed) before me this
_____ day of _____, 20__

(Notary Signature)

My commission expires _____ (Affix seal)

Notary Required*:

Your signature(s) must be notarized when removing a stop mail on an account.

IMPORTANT INFORMATION:

- If the bank account information for teletransfer or the wire redemption privilege on your accounts has changed, please call your financial representative for additional information.