

# Change of Address / Email / Phone Number

## Institutional Advisor Services



Account Number

### Section 1: Account Information

All accounts associated with this SSN or Tax ID will be updated.

#### A. Account Holder Information

1. Primary Account Owner/FBO:

First Name Middle Initial Last Name Last four of SSN or Tax Id

2. Secondary/Additional Account Owner:

First Name Middle Initial Last Name Last four of SSN or Tax Id

#### B. Entity Account Information

Business/Entity/Trust Name EIN/SSN/TIN Number

#### C. Trustee or Corporate Officer Information

1. Primary Account Owner/FBO:

First Name Middle Initial Last Name Last four of SSN or Tax Id

2. Secondary/Additional Account Owner:

First Name Middle Initial Last Name Last four of SSN or Tax Id

### Section 2: State Tax Withholding Update

- By checking here, you request an update to the tax withholding state for your systematic distribution request on file to the state of your legal address listed in Section 3, as applicable.

**Section 3: New Address**

**Legal Address** - P.O. Boxes are not allowed.

**Mailing Address** - P.O. Boxes are allowed, however if you are providing a P.O. Box for the Mailing Address, the current Legal Address will remain the same unless a new Legal Address is provided.

**New Address 1**

- Primary Account Owner
- Secondary/Additional Account Owner
- Entity
- Trustee or Corporate Officer (#1 or 2 from Section 1C): \_\_\_\_\_

**UTMA/UGMA and Custodial IRA and Roth IRA accounts only:**

- Update minor address.
- Update custodian address

**Address Type:**  Legal Address  Mailing Address  Both Legal and Mailing address

\_\_\_\_\_  
**Address 1**

\_\_\_\_\_  
**Address 2**

\_\_\_\_\_  
**City**

\_\_\_\_\_  
**State**

\_\_\_\_\_  
**Zip Code**

**New Address 2**

- Primary Account Owner
- Secondary/Additional Account Owner
- Entity
- Trustee or Corporate Officer (#1 or 2 from Section 1C): \_\_\_\_\_

**UTMA/UGMA and Custodial IRA and Roth IRA accounts only:**

- Update minor address.
- Update custodian address

**Address Type:**  Legal Address  Mailing Address  Both Legal and Mailing address

\_\_\_\_\_  
**Address 1**

\_\_\_\_\_  
**Address 2**

\_\_\_\_\_  
**City**

\_\_\_\_\_  
**State**

\_\_\_\_\_  
**Zip Code**

**New Address 3**

- Primary Account Owner
- Secondary/Additional Account Owner
- Entity
- Trustee or Corporate Officer (#1 or 2 from Section 1C): \_\_\_\_\_

**UTMA/UGMA and Custodial IRA and Roth IRA accounts only:**

- Update minor address.
- Update custodian address

**Address Type:**  Legal Address  Mailing Address  Both Legal and Mailing address

\_\_\_\_\_  
**Address 1**

\_\_\_\_\_  
**Address 2**

\_\_\_\_\_  
**City**

\_\_\_\_\_  
**State**

\_\_\_\_\_  
**Zip Code**

**Section 4: New Email Address**

By entering an email address, you are agreeing to change communications to electronic delivery.

**New Email Address 1**

- Primary Account Owner
- Secondary/Additional Account Owner
- Entity
- Trustee or Corporate Officer (#1 or 2 from Section 1C): \_\_\_\_\_

\_\_\_\_\_  
Email Address

**New Email Address 2**

- Primary Account Owner
- Secondary/Additional Account Owner
- Entity
- Trustee or Corporate Officer (#1 or 2 from Section 1C): \_\_\_\_\_

\_\_\_\_\_  
Email Address

**New Email Address 3**

- Primary Account Owner
- Secondary/Additional Account Owner
- Entity
- Trustee or Corporate Officer (#1 or 2 from Section 1C): \_\_\_\_\_

\_\_\_\_\_  
Email Address

**Section 5: New Phone Number**

**New Phone Number 1**

- Primary Account Owner
- Secondary/Additional Account Owner
- Entity
- Trustee or Corporate Officer (#1 or 2 from Section 1C): \_\_\_\_\_

\_\_\_\_\_  
Phone Number:     Home    Mobile    Business

**New Phone Number 2**

- Primary Account Owner
- Secondary/Additional Account Owner
- Entity
- Trustee or Corporate Officer (#1 or 2 from Section 1C): \_\_\_\_\_

\_\_\_\_\_  
Phone Number:     Home    Mobile    Business

**New Phone Number 3**

- Primary Account Owner
- Secondary/Additional Account Owner
- Entity
- Trustee or Corporate Officer (#1 or 2 from Section 1C): \_\_\_\_\_

\_\_\_\_\_  
Phone Number:     Home    Mobile    Business

**Section 6: Signature**

By signing this form, you hereby authorize Axos Advisor Services to remove your prior [address/phone/email/contact info] and update your information for ALL your accounts and remove and replace your prior address, email and/or phone numbers with the new information as indicated above.

\_\_\_\_\_  
Primary Account Owner or Authorized Party  
Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Secondary/Additional Account Owner or Authorized  
Party Signature

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Date

By signing as an authorized party for a corporate, company, association, LLC, LLP, LP, general partnership or retirement plan account, you certify that you are authorized to act individually and independently, without the consent of other officers, partners or trustees for all purposes related to the custodial account with Axos Advisor Services.