

Financial Advisor and Broker Dealer Change Authorization Form

Use this form to change the financial advisor and/or broker dealer servicing your investment. Your new financial advisor will have the information you need to complete this form. Please note: Signatures are required from your new financial advisor as well as a principal of the new broker dealer in order to authorize the change. If you are keeping the same financial advisor but changing broker dealers, you still need to complete this form. All account holders must sign this form.

Date:	Account Number:	Account Title:	
Address:		City, State, & Zip:	
RS Tax Identification Number:			
Please change	the current financial advi	isor servicing my account to the new advisor as indicated be	vlow.
Current Advisor Information			
Name of Advisor:		Name of Broker Dealer:	
Advisor Office Address:		City, State, & Zip:	
Advisor Phone Number:		Broker Dealer Phone Number:	
New Advisor Information			
Name of Advisor:		Name of Broker Dealer:	
Advisor Office Address:		City, State, & Zip:	
Advisor Phone Number:		Broker Dealer Phone Number:	
Send completed form to:			
Mail Meeder Investment Management 6125 Memorial Drive Dublin, OH 43017		Fax (614) 766-6669	
Signature of Primary Account Holde	er Date	Signature of Secondary Account Holder	 Date
Signature of New Advisor	 Date	-	
Signature of Broker Dealer	 Date	Printed Name of Broker Dealer	Date