

# Change of Address Authorization

PERSHING ADVISOR SOLUTIONS LLC

Use this form to notify Pershing Advisor Solutions to change your address on your accounts.

## STEP 1. ACCOUNT NUMBER(S)

Account Number
Account Number
Account Number
Account Number
Account Number
Account Number

Account Number
Account Number
Account Number
Account Number
Account Number
Account Number

## STEP 2. INSTRUCTIONS AND SIGNATURES

Please accept this form as authorization to change my:

Legal Address     Mailing Address     Both

### Current Address

Address		
City	State	Zip/Postal Code
Province/County/Subdivision	Country	

### New Address

Address		
City	State	Zip/Postal Code
Province/County/Subdivision	Country	
Telephone		

### Account Holder

Print Name	Date
Signature	

### Joint Account Holder (if applicable)

Print Name	Date
Signature	

