

## Account Change Form & Instructions

Use this form to change any of the following:

- Legal or Mailing Address
- Account number (intra firm)
- Financial Advisor information (intra firm)

### 1. Investor Information *Please print clearly.*

_____	_____	_____	_____
Grant Park Account Title (how the statement reads)	Grant Park Investor ID	Social Security Number	
_____	_____	_____	_____
Address (if changing)	City	State	Zip
_____	_____	_____	_____
Daytime Phone Number	Email		
	<input type="checkbox"/> Check box to opt out of accessing your monthly statement online		

### 2. Account Information *Complete this step if you are changing your account number*

Original account number _____	New account number _____
-------------------------------	--------------------------

### 3. Financial Advisor Information *Please complete this section if you are updating your advisor or branch information within the same firm.*

_____	_____	_____	_____	_____
Name of New Advisor	Daytime Phone Number	Fax Number		
_____	_____	_____	_____	_____
Advisor ID Number	Branch ID Number	Email		
_____	_____	_____	_____	_____
Firm Name	Address	City	State	Zip

### 4. Authorization *FA or investor must sign this section.*

_____	_____
Investor's Name (print)	Financial Advisor's Name (print)
_____ / /	_____ / /
Investor's Signature	Financial Advisor's Signature
Date	Date

Please return via fax to 312.756.4452 or email [cs@dearborncapital.com](mailto:cs@dearborncapital.com)