Coordinated Capital Securities, Inc. 704 River Place Madison WI 53716 (608)221-4545

CLIENT CHANGE OF BROKER DEALER FORM

Reset Form

INSTRUCTIONS:

- THIS FORM MUST BE SUBMITTED TO CCS FOR APPROVAL
- THIS FORM WILL NOT BE PROCESSED WITH OUT A COMPLETED CCS NEW ACCOUNT FORM
- COMPLETE ONE FORM FOR EACH FUND FAMILY
- ATTACH A COPY OF THE CLIENT'S STATEMENT

INVESTMENT COMPANY/SPONSOR: _____

NAME OF ACCOUNT/HOUSEHOLD: _____

AUTHORIZATION:

Please accept this letter as your authority to change the investment dealer on the following account numbers:

NAME OF FUND:	ACCOUNT #:

CURRENT DEALER INFORMATION:			
NAME OF CURRENT DEALER:			
CURRENT DEALER#	CURRENT BRANCH#	CURRENT REP NAME:	CURRENT REP#:
CURRENT BRANCH ADDRESS::			

NEW DEALER INFORMATION:			
NAME OF NEW DEALER: COORDINATED CAPITAL SECURITIES, INC.			
NEW DEALER#	NEW BRANCH#	NEW REP NAME:	NEW REP#:
NEW BRANCH ADDRESS:: ☐ SAME AS OLD OR PROVIDE:			

ACCOUNT-HOLER SIGNATURES:

_____ _____

Signature of Investor Date Signature of Co-Investor (if applicable) Date

☐ CCS NAF ON-FILE ➲ PRINCIPAL APPROVAL BY: _____ ON:_____ ➲ PROCESSED BY: _____ ON:_____