

# Account Maintenance Request Form

All requests must be received by 1:30pm EST for same day processing.

**TO: National Financial Middle Office**

**FAX: (800) 346-9378**

**NFS ACCOUNT NUMBER:**

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CHOOSE ONE:

ADD

CHANGE

DELETE

CLOSE ACCOUNT

**LEGAL NAME CHANGE\***

(Legal name change requires appropriate supporting documents. e.g., divorce decree, marriage certificate, etc.)

Owner's Current Name on Account First  MI  Last Name  Jr.  Sr.

Owner's New Name on Account First  MI  Last Name  Jr.  Sr.

**NEW MAILING ADDRESS**

Street Address

City  State  Zip Code

Daytime Telephone Number

Evening Telephone Number

**NEW MAILING ADDRESS**

\*You must complete this section if your new mailing address is a P.O. Box number or a C/O, unless the legal address you have previously provided remains unchanged.  
\*On a separate sheet of paper, please provide the joint owner's legal address if it is different.  
\*A P.O. Box and C/O are not acceptable as a legal address.

Street Address

City  State  Zip Code

**INTERESTED PARTY\***

ADD

CHANGE

DELETE

First Name  MI  Last Name  Jr.  Sr.

Organization Name

Street or P.O. Box  Apartment

City  State  Zip Code/Postal Code

**CHECKBOOK REORDER**

Address of Record

Alternate Mailing Address\* (Please include address)

**Dividend Income Option Change\*:  
(check one)**

- 3 = Mutual fund dividends will be reinvested; cash stock dividends will react as coded in the proceeds field.
- 4 = No dividends will be reinvested; all dividends will react as coded in the proceeds field
- D = All eligible equity and mutual funds dividends will be reinvested
- S = All eligible equity dividends will be reinvested; mutual fund dividends will react as coded in the proceeds field

(\* To send dividends out of an account, please use the earnings distribution form)

Registered Rep Name:

R.R. Phone Number:

Registered Rep Signature:

Joint Client Name:

Client Signature:

Joint Client Signature:

\*Requests must be signed by the client