Investment Change/Transfer Form

General Information:

Employer_____

Employee Name_____ Date of Birth ____/____/____

Street _____ City_____ State ____ Zip_____

Social Security Number _____ Date of Hire ____/____/____

Current Portfolio – Complete Section A or Section B below.
Changes made will be effective immediately or fill in blanks for a future effective date: ____/____/____

[ ] Section A – Rebalance TOTAL current account portfolio OR [ ] Section B - Fund to Fund Transfer

Fund Name/ Ticker	%
Total MUST equal 100%	100%

Transfer FROM Fund:	[ ]$ or [ ]%

Transfer TO Fund:	% only
Total MUST equal 100%	

Future Contributions – Complete Section C or Section D

Section C – If you rebalanced your account in Section A, and wish the same instructions to be applied to your future contributions, check the box in this section below

[ ] Apply instructions in Section A to Future Contributions

OR Section D – New Allocation Instructions for Future Contributions

Fund Name/Ticker	%
Total MUST equal 100%	

SIGNATURE

_____ _____

Employee/Participant Signature Date