



We help people retire well.®



# Change of Address/Name

Registered Investment Advisor \* Broker/Dealer Member FINRA/SIPC \* 218 Glenside Avenue, Wyncote, PA 19095 \* 215/887-8111 \* www.lincolninvestment.com

## INVESTOR INFORMATION

Name: **First** \_\_\_\_\_ **Middle** \_\_\_\_\_ **Last** \_\_\_\_\_

Joint Name: **First** \_\_\_\_\_ **Middle** \_\_\_\_\_ **Last** \_\_\_\_\_

Corporate, Trust or Other Entity Name: \_\_\_\_\_

SSN/TIN: \_\_\_\_\_

## ADDRESS

**FORMER:**

Street Address (no PO Box): \_\_\_\_\_

Mailing Address (if different from residence): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone(s) Day: \_\_\_\_\_ Evening: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

**NEW:**

Street Address (no PO Box): \_\_\_\_\_

Mailing Address (if different from residence): \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone(s) Day: \_\_\_\_\_ Evening: \_\_\_\_\_ E-mail Address: \_\_\_\_\_

## NAME CHANGE

Please attach proof of name change (i.e. copy of marriage certificate, court decree, or valid driver's license).

**FORMER:**

Name: **First** \_\_\_\_\_ **Middle** \_\_\_\_\_ **Last** \_\_\_\_\_

Signature: \_\_\_\_\_ Signature Attestation: \_\_\_\_\_

**NEW:**

Name: **First** \_\_\_\_\_ **Middle** \_\_\_\_\_ **Last** \_\_\_\_\_

Signature: \_\_\_\_\_ Signature Attestation: \_\_\_\_\_

## INVESTMENT

Please apply the requested changes to the following investments: **NOTE:** Use one form per fund family.

FUND/INVESTMENT NAME	ACCOUNT NUMBER

Financial Representative Name: \_\_\_\_\_ FR#: \_\_\_\_\_ BR#: \_\_\_\_\_

**Lincoln Investment Planning, Inc. will confirm the changes noted above, in writing, within 30 days of receipt of notice. If you do not receive this confirmation, please contact Lincoln Investment Planning, Inc. or your Financial Representative.**

