## Fidelity Investments Update Name, Address, and/or Date of Birth

*Instructions:* To update your name, address, and/or to provide us with your date of birth, please complete this form. This form applies to your tax-exempt plans only [403(b), 401(a), 401(k), or 457(b)].

**Plan sponsor approval:** Check with the plan sponsor or Fidelity to determine if plan sponsor involvement is required to change your records. You may need to obtain the approval of the employer who sponsored the retirement plan to change the information below. Also be aware that, in many situations, changes must be submitted directly to the plan sponsor who, in turn, will update its employee records and then electronically update Fidelity's records.

**To change your name:** Please provide a copy of a marriage certificate, divorce decree, court document granting a name change, or passport; or, complete the Medallion Signature Guarantee with your former and current name, on the second page of this form.

**For address changes:** A confirmation of your address change will be sent to your old and new addresses. To ensure the security of your account, your account will be frozen from loan and withdrawal activity for 10 calendar days. To waive this 10-day freeze, you are required to complete the Medallion Signature Guarantee on the second page of this form. Please notify us should you not receive the current address confirmation. The address will be treated as your address for state income tax withholding, if applicable, or nonresident alien withholding for United States income tax withholding.

**Date of birth:** Please provide a copy of your birth certificate, driver's license, or other federal, state, or locally issued identification that contains your date of birth. We must have your date of birth on file for you to establish a username or request a withdrawal.

**Questions:** Call Fidelity Investments at **800-343-0860 or, for the hearing impaired**, **800-259-9743 (TTY)**, Monday through Friday, from 8:30 a.m. to 8:30 p.m. Eastern time, excluding holidays when the New York Stock Exchange is closed (except Good Friday), or visit us at <u>NetBenefits.com/atwork</u>.

1. YOUR INFORMATION						
What information are you changing? (Check all that apply.)						
Name	Address	Date of Birth				
Please fill in all information below and include updated information where applicable.						
Social Security #:		Correct Date of Birth:				
Current First Name:*		M.I.:				
Current Last Name:*						
Former First Name:*						
Former Last Name:*						
Mailing Address:			Apt. #:			
Address Line 2:						
City:			State:			
ZIP Code:		<b>OR</b> Foreign Delivery Designation:				
Country (if other than Unite	ed States):					
Daytime Phone:		Evening Phone:				
Email Address:						

\*For a name change, please provide both your new and former names.

## 2. YOUR SIGNATURE

A Medallion Signature Guarantee is required if you are changing your address and would like to waive the 10-day freeze regarding distributions. A Medallion Signature Guarantee can be obtained at a United States bank or other financial institution. You can also use a Medallion Signature Guarantee to change your name as a substitute to the documentation listed on page 1. Be sure to let the bank or financial institution know the amount of the distribution that you may request so that it will provide the appropriate Medallion Signature Guarantee. Notaries public cannot provide a Medallion Signature Guarantee, as their authority does not extend to documents such as this, for which federal securities law applies.

Your Signature:	Date MM DD YYYY	
SIGN		
NOTE: A NOTARY PUBLIC CANNOT PROVIDE A SIGNATURE GUARANTEE. IF YOU ARE LOCATEI UNITED STATES, A UNITED STATES EMBASSY O SIGNATURE AND STAMP IS ACCEPTABLE.	D OUTSIDE THE	
If the guarantee stamp to the right is not a Medallion Si print the name and telephone number of the person iss the guarantee:	-	
	Place Meda	llion Signature Gi
If you are obtaining the Medallion Signature Guarantee	for a name change, please prov	ide your former a
Former Name:		

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uarantee stamp in box.

If y and new name here.

Former Name:			
New Name:			

If you are submitting additional documents, please check here and list below:

## 3. PLAN SPONSOR APPROVAL

If applicable, the changes on the previous pages have been approved by the plan sponsor or plan administrator.

As plan administrator, I acknowledge receipt of this form:

Signature:	
Print Name:	
Date:	
Plan/Client Name:	

Ways to Return This Form to Fidelity:

Electronically: Use the **Send a Document** *Action* **found in the NetBenefits® Mobile apps.** 

Regular Mail: Fidelity Investments, P.O. Box 770002, Cincinnati, OH 45277-0090

Overnight Mail: Fidelity Investments, 100 Crosby Parkway, KC1E, Covington, KY 41015

If you have any questions, please contact one of our Retirement Services Representatives at **800-343-0860**, Monday through Friday, from 8:30 a.m. to 8:30 p.m. Eastern time, excluding holidays when the New York Stock Exchange is closed (except Good Friday), or visit us at <u>NetBenefits.com/atwork</u>.



Fidelity Investments Institutional Operations Company LLC.