

- ▶ Complete this form when requesting a change as the representative of an Account Owner that is a trust, estate, Business entity, 501(c)(3) organization, or state or local government agency (Entity).
- ▶ **Questions?** Visit www.vheip.org or call us at **1-800-637-5860**.

1. ACCOUNT INFORMATION

Entity Name

Representative Name (First, M, Last, Suffix)

Account Number (required)

Beneficiary Name (First, M, Last, Suffix)

2. NEW ACCOUNT OWNER INFORMATION

Before me, the undersigned authority, personally appeared _____ (Representative), who swore or affirmed that;

1. Representative is currently serving as the person authorized to act on behalf of _____ (Entity) to conduct all transactions with respect to the above-referenced VHEIP account.
2. The supporting documentation provided when the account was opened or last updated remains unchanged and still accurately reflects the status of the Entity.
3. The Entity has not been liquidated, terminated, or dissolved and continues to function in good standing.

3. SIGNATURE AND NOTARIZATION

Signature of Authorized Representative of Entity Account Owner

STATE OF _____

COUNTY OF _____ ss.

Before me, the undersigned authority, personally appeared, _____ to me personally known _____; or who produced the following identification _____ who, upon being duly sworn, stated that the information provided in this form is true, accurate, and complete to the best of his/her knowledge, information, and belief. In witness whereof, I have placed my hand and seal in county and state last aforesaid on this _____ day of _____, 20____.

BEFORE ME