

# Change

## Shareholder Update

Please update your contact information if any of it changes.

Name	SSN/TIN*
New Address	
City, State, Zip	Country
Phone	E-mail
Signature	Date

\*For security reasons, you must provide *either* your Social Security Number/Tax ID Number or a copy of your driver's license. This allows us to verify your identity prior to changing your information in our system.

**Please send this form to ClearTrust, LLC: [inbox@cleartrusttransfer.com](mailto:inbox@cleartrusttransfer.com)**

*Prefer to skip the paper? Ask your issuer about joining ClearConnect so you can update your contact information quickly and easily online.*