



## ADDRESS CHANGE AUTHORIZATION

If you have moved and would like to change your home address, please complete this section. Completed forms can be sent via email to [INVESTORSERVICES@FSCAP.NET](mailto:INVESTORSERVICES@FSCAP.NET) or faxed at 732-676-7759.

**Name(s):** \_\_\_\_\_

**Account Name:** \_\_\_\_\_

**Email Address:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Last 4 digits of SSN:** \_\_\_\_\_

**Signature:** \_\_\_\_\_ **Last 4 digits of SSN:** \_\_\_\_\_

### New Residential Address:

**Address Line 1:** \_\_\_\_\_

**Address Line 2:** \_\_\_\_\_

**City, State & Zip:** \_\_\_\_\_

**Telephone(s):** \_\_\_\_\_