



**American Realty Capital  
Financial Advisor Change Form**

Mail: Three Copley Place, Suite 3300, Boston, MA 02116  
For Questions, Contact Investor Services by Phone: (866) 771-2088 · Fax: (857) 350-9597

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**Account Information**

Provide the investor(s) / registration name and account number for the account that you are requesting to have the financial advisor changed.

Name of Investor \_\_\_\_\_

Name of Joint Owner \_\_\_\_\_

Account Number \_\_\_\_\_

Address \_\_\_\_\_

City, State, ZIP \_\_\_\_\_

Telephone \_\_\_\_\_ E-mail \_\_\_\_\_

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**Previous Financial Advisor**

Broker / Dealer NASD Firm Name \_\_\_\_\_

Registered Representative \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

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**New Financial Advisor**

Broker / Dealer NASD Firm Name \_\_\_\_\_

Registered Representative \_\_\_\_\_

Mailing Address \_\_\_\_\_

City, State, Zip \_\_\_\_\_

Telephone Number \_\_\_\_\_ Fax Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

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**Authorization & Signatures**

All investor(s) / registration owner(s) must sign the form to authorize the above instructions.

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SIGNATURE OF OWNER

DATE

SIGNATURE OR JOINT OWNER

DATE