

CBRS
Letter of Authorization (LOA)
Address Change Request

1. Schwab Account Information

Please check one only:

- ☐ Plan (Trustee signature only)
- ☐ Participant (FBO) (Trustee or participant signature accepted)
- ☐ Independent Recordkeeper (Authorized Agent signature)
- ☐ Third Party (Duplicate mailings) (Authorized Agent signature)

Schwab Account Number	Account Name

2. Address Information

Previous Address:	
Physical (NO PO Boxes allowed)	City, State, Zip Code
Mailing (If different than above, PO Boxes allowed)	City, State, Zip Code

Current Address:	
Physical (NO PO Boxes allowed)	City, State, Zip Code
Mailing (If different than above, PO Boxes allowed)	City, State, Zip Code

Phone Number (if changing):	
Previous	Current

3. Please Read and Sign

I authorize Charles Schwab & Co., Inc. to update my account (as listed) pursuant to the above instructions.

Authorized Signature	Title
Print Name	Date