

## **Change of Broker-Dealer Form**

This form is to be used **ONLY** if you are changing the broker-dealer on an existing Franklin Templeton account. If completing by hand, please print clearly in CAPITAL LETTERS using blue or black ink. Broker-dealer contact name (if this form is being submitted by someone other than the listed financial professional) Daytime phone number If applicable, provide any Franklin Templeton REFERENCE ID(S) related to your request: **ACCOUNT INFORMATION** (complete only one type) I/WE AUTHORIZE THE CHANGE OF BROKER-DEALER ON: A. ALL accounts registered under the following SSN/TIN, or broker identification number or asset summary number: SSN/TIN Broker identification number OR Fund-account number **B.** ALL accounts identically registered as this account: Fund-account number(s) C. ONLY the account number(s) listed: **BROKER-DEALER INFORMATION SECURITIES DEALER** New securities broker-dealer name Main office address ZIP City State FINANCIAL PROFESSIONAL First name M.I. Last name Telephone number Email address Dealer number Branch number Representative number Branch address City State ZIP

 $\hbox{IF naming more than one financial professional, provide information on a separate sheet. } \\$ 

## 3 REQUIRED SIGNATURE(S)

## FRANKLIN TEMPLETON ACCOUNT OWNER(S) SIGNATURE(S)

Each person authorized to transact business on the account(s) identified in Section 1 must sign this form.

The signature(s) must correspond exactly with the name(s) registered on the account(s).

Printed name	Printed name	
Date X Franklin Templeton Account Owner Signature	Tanklin Templeton Account Owner Signature	
AUTHORIZED SIGNER OF BROKER-DEALER  If this request is being submitted by an existing broker-dealer to reassign Section 2 must sign this form.	accounts, the FINRA registered principal of the firm for the securities dealer listed in	
Printed name	Title	
x	Date	

Authorized signature (Registered Principal for the Securities Dealer)

## MAKE A PHOTOCOPY OF THE COMPLETED FORM FOR YOUR RECORDS

CMAII	FAX	MAIL
EMAIL	FAX	MAIL
Emails MUST include an attachment (PDF preferred) of your request.	(855) 891-8377	You may use any of the below mailing addresses:
Sender's email address MUST match the email address on file, or the email MUST include a related reference id(s) to be accepted.		Regular Mail • Franklin Templeton
Digital communication channels are not necessarily secure. If you do choose to send confidential or sensitive information to us via digital communication channels (e.g., email, chat, text messaging, fax), you are accepting the associated risks related to potential lack of security, such as the possibility that your confidential or sensitive information may be intercepted/accessed by a third		P.O. Box 33030 St. Petersburg, FL 33733–8030  Overnight  Franklin Templeton 100 Fountain Parkway N. St. Petersburg, FL 33716–1205
<ul> <li>party and subsequently used or sold.</li> <li>If you have not been registered on franklintempleton.com for at least 15 calendar days, call (800) 632-2301 to request a reference id to include in your email.</li> </ul>		
Financial Professionals: ftrequests.us.franklintempleton@fisglobal.com Shareholders: shrequests.us.franklintempleton@fisglobal.com		