

Account Successor Form

As the Account Owner, you may designate an individual other than the Beneficiary/Student to assume all rights and responsibilities of an Account in the event of your death, legal incompetence or if you cannot be located by CollegelInvest. To exercise this option, complete, sign and return this form to: CollegelInvest, 1560 Broadway, Suite 1700, Denver, CO, 80202.

For assistance, please call 800.448.2424 or email general@collegeinvest.org.

Account Information: (Please Print)	
Account Owner's Name	Account Number
Established for the benefit of:	
Beneficiary's Name	Beneficiary's Social Security Number

As the Account Owner, I hereby direct that in the event of my death, legal incompetence or if I cannot be located, all of my rights as the Account Owner will be transferred to, and all my obligations as Account Owner will be assumed by, the individual indicated below:

Please check box if this form is completed to replace an already existing Account Successor

Designation of Account Successor: (Please Print)		
Name of Successor	Social Security Number	
Address	Phone Number	
City	State	Zip
Email Address		

This instruction is intended to become part of my existing Account, and to supersede any contrary provisions of the Contract Terms applied to my Account. I understand there may be potential tax and other financial consequences as a result of my rights and obligations being transferred to another Owner. CollegelInvest has recommended that I consult my tax and other advisors as to any such consequences.

Account Owner's Signature	Date
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Return the completed form to: CollegelInvest, 1560 Broadway, Suite 1700, Denver, CO 80202