Investment Substitution Form

Please return by email to trades@easternpointservices.com. Call **866-920-5477** to verify receipt of this form.
Note: **Request will not be processed unless all information is complete. P.O. Box 3322 Warrenton, VA 20188**

SECTION A: INVESTMENT INFORMATION

Applying to the Trust (Name) _____ Trust ID# _____

SECTION B: SELL / TRANSFER FROM

FUND NAME	TICKER SYMBOL	PERCENT
		%
		%
		%
		%
	TOTAL	% 0.00

SECTION C: BUY / TRANSFER TO

FUND NAME	TICKER SYMBOL	PERCENT
		%
		%
		%
		%
	TOTAL	% 0.00

SECTION D: DISCLAIMER

I request the Trustee execute the instructions as set forth above and I understand that: The value of investments may fluctuate over time and that risks are associated with investing. This request shall be executed as administratively feasible and trades may be delayed subject to funds becoming collected. I waive all rights and claims to any investment returns except for those as actually achieved by and when the funds were invested. The assets of the Trust belong to the Trust and are subject to the terms of the above named Trust.

Per the terms of the associated Trust, I release and hold harmless the Trustee, and waive any all rights and claims against the Trustee or its Third Parties associated with this request's execution, delay, rejection or timing.

I attest that I am not an "insider" as defined by the Securities and Exchange Commission and this request does constitute an "insider trade."

SECTION E: AUTHORIZATION

Family Contact Printed Name:

_____

Family Contact Signature:

MM / DD / YYYY

_____ Date: _____

Choose a Signature Option

PRINT FORM

SUBMIT FORM

CLEAR FORM

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