



## **Account Information Change Form**

Please use this form to submit changes to your Significance Foundation Donor-Advised Fund. If you need assistance, call (888) 488-1288.

### **Fund Information**

Fund Name: \_\_\_\_\_

Name of Donor-Advisor \_\_\_\_\_

Donor-Advisor Social Security Number: \_\_\_\_\_

**Personal Information Change**

Dr.  Mr.  Mrs.  Ms.  Miss

Name: \_\_\_\_\_

Address: \_\_\_\_\_

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

Home Phone: (\_\_\_\_) \_\_\_\_\_

Business Phone: (\_\_\_\_) \_\_\_\_\_

Email: \_\_\_\_\_

**Change Fund Name:**

New Fund Name: \_\_\_\_\_

(Fund number will remain the same)

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**Acknowledgement:**

**The Undersigned Donor(s) acknowledge that I/we am/are authorized to make changes to this account. I/we understand that my recommendations are advisory only and are subject to the full and exclusive control and discretion of the Significance Foundation.**

**Donor 1:**

\_\_\_\_\_  
Signature \_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

**Donor 2:**

\_\_\_\_\_  
Signature \_\_\_\_\_  
Date

\_\_\_\_\_  
Printed Name

Submit completed form to the Significance Foundation:

Fax (619) 232-8197

Email [jplatt@significancefoundation.org](mailto:jplatt@significancefoundation.org) (PDF files with signatures only)

US Mail: ATTN: Donor Services

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