

Address Change Request

1. Customer Information

Name of Individual #1 (**print**)

Name of Individual #2, if any (**print**)

Customer Number (10-digits)

Customer Number (10-digits)

Customer Number (10-digits)

Customer Number (10-digits)

Customer Number (10-digits)

Customer Number (10-digits)

Customer Number (10-digits)

Customer Number (10-digits)

2. Address and Telephone Numbers

Please update my/our account(s) with the following new address and telephone number(s), if applicable.

U.S Mailing Address

City

State

Zip

Residential Street Address

(mandatory, if mailing address contains a P.O. Box, "care of" or temporary address)

City

State

Zip

Home Phone #

Work Phone # (optional)

Cell Phone # (optional)

3. Signature(s)

I/We authorize you to change my/our address for all accounts under my/our customer number(s) listed in **Section 1** of this form.

Signature of Individual #1

Date

(SG)

Signature of Individual #2, if any

Date

(SG)

(SG)

A signature guarantee is required when an address is updated on an account which has been coded "Do Not Mail" because mail has been returned as undeliverable.

Affix Medallion Signature Guarantee Here, If Required:

Stamps qualified for a specific date and/or individual, or altered in any manner, may not be accepted.

Return by Regular Mail:

Foresters Investor Services, Inc.
Attn: New Accounts Department
P.O. Box 7837, Edison, NJ 08818-7837

Return by Overnight Mail:

Foresters Investor Services, Inc.
Attn: New Accounts Department
Raritan Plaza I, 8th Floor, Edison, NJ 08837-3620

For More Information:

First Investors Funds
800-423-4026 (Shareholder Services)
www.foresters.com