

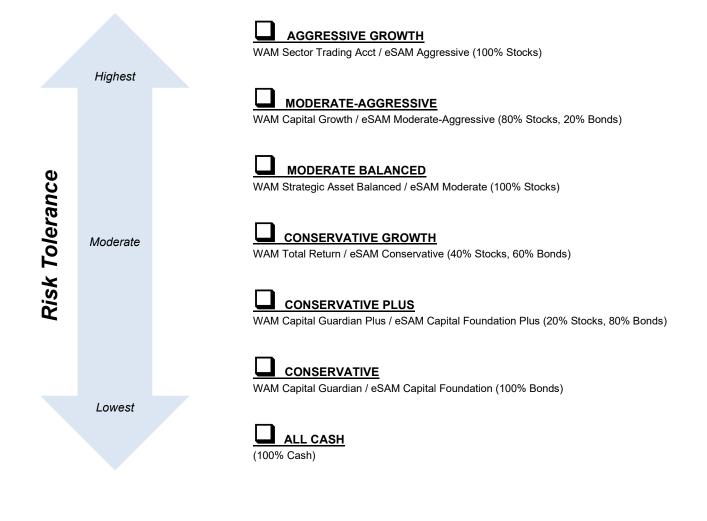
## ASSET ALLOCATION / MODEL CHANGE AUTHORIZATION FORM

## **PROFILE INFORMATION:**

Account Name	Account Number
General Investment Objective	Account Type
Financial Advisor	Current model allocation

## Email address

By signing below, I authorize and instruct Nelson Securities, Inc. to change the investment allocation of the account listed above. I understand that a change in investment objective may also generate a change in risk and I accept this change in risk tolerance. Based on my financial situation, my risk tolerance for this account is:



Account Owner Signature

Date

Account Co-Owner Signature, if applicable

Date

Because frequent trading in mutual funds can adversely affect the performance of the fund, some mutual fund companies have placed restrictions regarding frequent trading. Due to these restrictions, Nelson Securities, Inc. must limit the frequency of model changes per account to once in a 90-day calendar period. Standard withdrawals, contributions, and distributions are not included in this policy.