

CHANGE OF DEALER FORM
(Please print or type)

Date: _____

I/We hereby authorize the change of dealer for the following account(s):

Fund Name

Account No. _____ registered as:

Name(s) _____

Address _____

Telephone _____

New securities dealer name: Pyramid Funds Corporation
21 Everett Road Ext., Albany, NY 12205
518-459-1671
Email: invest@pyramidfunds.com

Branch number Representatives # Representative's name

Signed _____

Signed _____

Please print name

Please print name

Authorized signature, Securities Dealer

Title