

- ▶ Use this form to:
 - » Change the Account Owner.
 - » Update a Legal Name, Social Security Number or Date of Birth for the Account Owner.
- ▶ A Notary Signature is required if you are changing the Account Owner or Account Owner's name. If the Account Owner is deceased and you are the Successor please provide a copy of the death certificate and complete this form. If no Successor is listed on the account, please complete this form and provide certified copies of the death certificate and court appointed documents naming you as Executor.
- ▶ Complete a separate form for each change of Account Owner.
- ▶ **Note:** Failure to provide the required information may result in a delay in processing your request.
- ▶ Complete a separate form for each Account, and upload by logging in to **access.wvjumpstart.gov**.

1. CURRENT ACCOUNT OWNER INFORMATION *(required)*

<input type="text"/>	<input type="text"/>
Account Number	Account Owner, Custodian, or Authorized Representative Name <i>(first, MI, last)</i>
<input type="text"/>	<input type="text"/>
Phone Number	Beneficiary Name <i>(first, MI, last)</i>

2. NEW ACCOUNT OWNER INFORMATION *(required)*

Please select one of the following options:

- Change** to a new Account Owner
 Update the current Account Owner

The new Account Owner must be at least 18 years old and will assume all rights with respect to the Account that you, as the Account Owner, now have. The current Account Owner's Successor will be removed when the Account Owner is changed. The new Account Owner may designate a Successor Owner by completing an Account Maintenance form found at access.wvjumpstart.gov.

- ▶ For a **misspelled name** or **incorrect date of birth**, you must provide a copy of either the birth certificate or Driver's License.
- ▶ For a **legal name change** you must provide legal documents certifying the name change.
- ▶ For **corrections to a Social Security Number or Taxpayer Identification Number**, you must provide a copy of your U.S. government-issued Social Security or Taxpayer ID card.

Provide the information below whether you are **changing** or **updating** the Account Owner:

<input type="text"/>	<input type="text"/>	<input type="text"/>
New Account Owner's First Name	Middle Initial	Last Name
<input type="text"/>	<input type="text"/>	<input type="text"/>
Social Security Number or Taxpayer ID Number	Date of Birth <i>(mm/dd/yyyy)</i>	
<input type="text"/>	<input type="text"/>	
Street Address Line 1	Street Address Line 2	
<input type="text"/>	<input type="text"/>	
City	State	ZIP Code
<input type="text"/>	<input type="text"/>	<input type="text"/>
Primary Phone Number	Email Address	
<input type="text"/>	<input type="text"/>	

3. REASON FOR TRANSFER *(please select one)*

- I am the current Account Owner** and I hereby transfer my rights, title, and interest in the above referenced Jumpstart account to the new designated Account Owner listed on this form.
- The current Account Owner is deceased and I am the Account Owners' Successor for the Account listed in Section 1.** I have attached a certified copy of the current Account Owner's death certificate. *
- The current Account Owner is deceased and I am not the Account Owner's Successor for the Account listed in Section 1.** I have attached a certified copy of the Account Owner's death certificate and a copy of the court documentation giving evidence of my appointment as Executor/Representative of the Account Owner's estate. *

* If Successor Owner is a Trust, Trust Documentation is required before the Account Owner can be changed.

4. NEW ACCOUNT OWNER SIGNATURE *(this section must be signed)*

By signing below, I understand and agree that these documents govern all aspects of this Account and are incorporated herein by reference.

I certify that I authorize Jumpstart and its agents and their affiliates to act on the instructions based upon this information. I understand that the West Virginia Jumpstart Savings Program Account Disclosure Statement & Informational Booklet may be amended from time to time and I understand and agree that I will be subject to the terms of those amendments. If I am issuing instructions for an account in a representative capacity (e.g., as a Trustee of a Trust or pursuant to a Power of Attorney), I understand and acknowledge that I am assuming any responsibility for any adverse consequences resulting from my instructions. I further agree that neither Jumpstart, nor its agents will be liable for any loss, liability, cost or expense for acting upon these instructions, except to the extent required by applicable law.

Signature of New Account Owner, Custodian, or Authorized Representative Account Owner

Date (mm/dd/yyyy)

5. CURRENT ACCOUNT OWNER SIGNATURE & AUTHORIZATION *(complete this section in the presence of a notary)*

By signing below, I understand and agree that these documents govern all aspects of this Account and are incorporated herein by reference.

I certify that I am the Account Owner, or I have the authority to act on behalf of the Account Owner, and additionally that:

It is my intent to make the change(s) noted in the applicable section(s) above on the account listed in Section 1. I understand that if I am changing the Account Owner, I certify that it is my intent to revoke the rights of the current Account Owner and name a new Account Owner. All the information provided by me on this form is, and all information provided by me in the future will be, true, complete, and correct. I authorize Jumpstart and its agents and their affiliates to act on my instructions based upon this information. I understand that the West Virginia Jumpstart Savings Program Account Disclosure Statement & Informational Booklet may be amended from time to time and I understand and agree that I will be subject to the terms of those amendments. If I am issuing instructions for an account in a representative capacity (e.g., as a Trustee of a Trust or pursuant to a Power of Attorney), I understand and acknowledge that I am assuming any responsibility for any adverse consequences resulting from my instructions. I further agree that neither Jumpstart, nor its agents will be liable for any loss, liability, cost or expense for acting upon these instructions, except to the extent required by applicable law.

Signature of Current Account Owner, Custodian, or Authorized Representative Account Owner

Date (mm/dd/yyyy)

6. NOTARIZATION

ALL SECTIONS OF THE NOTARIZATION BELOW MUST BE COMPLETED BY A NOTARY AND LEGIBLE.

STATE OF _____ SS.

COUNTY OF _____

Be it remembered that on the _____ day of _____

A.D. 20____, personally appeared _____
signer and sealer of the foregoing written instrument and
acknowledged the same to be his/her free act and deed.

BEFORE ME,
