

4 Allocation Instructions

(Check one box)

- Use my current allocation instructions on file for future contributions.
- Establish or change my allocation instructions as indicated below for my future contributions.
 - Use a whole percentage next to each Investment Option below. The TOTAL of all allocations must equal 100%.
 - The Plan will apply these allocation instructions to future Automatic Contribution Plan (ACP) contributions.
 - These allocation instructions will not apply to payroll contributions, if any.

You can change your Allocation Instructions online, by telephone or by form at any time.

Investment Option Name (Investment Option Code)	Whole Percentage (per Investment Option)	Check if new Investment Option¹
Age-Based Option	%	<input type="checkbox"/> New Option
Aggressive Age-Based Option	%	<input type="checkbox"/> New Option
Index-Based Aggressive Portfolio (3427)	%	<input type="checkbox"/> New Option
Index-Based Growth Portfolio (3428)	%	<input type="checkbox"/> New Option
Index-Based Moderate Growth Portfolio (3429)	%	<input type="checkbox"/> New Option
Index-Based Conservative Growth Portfolio (3430)	%	<input type="checkbox"/> New Option
Index-Based Income Portfolio (3431)	%	<input type="checkbox"/> New Option
Active-Based Aggressive Portfolio (3432)	%	<input type="checkbox"/> New Option
Active-Based Growth Portfolio (3433)	%	<input type="checkbox"/> New Option
Active-Based Moderate Growth Portfolio (3434)	%	<input type="checkbox"/> New Option
Active-Based Conservative Growth Portfolio (3435)	%	<input type="checkbox"/> New Option
Active-Based Income Portfolio (3436)	%	<input type="checkbox"/> New Option
Balanced Portfolio (3437)	%	<input type="checkbox"/> New Option
Large-Cap Stock Index Portfolio (3438)	%	<input type="checkbox"/> New Option
Small-Cap Index Portfolio (3439)	%	<input type="checkbox"/> New Option
International Equity Index Portfolio (3440)	%	<input type="checkbox"/> New Option
Bond Index Portfolio (3441)	%	<input type="checkbox"/> New Option
U.S. Equity Active Portfolio (3442)	%	<input type="checkbox"/> New Option
U.S. Equity Index Portfolio (3443)	%	<input type="checkbox"/> New Option
Social Choice Portfolio (3444)	%	<input type="checkbox"/> New Option
Bank CD Portfolio (3445)	%	<input type="checkbox"/> New Option
Principal Plus Interest Portfolio (3446)	%	<input type="checkbox"/> New Option
TOTAL	100%	

¹ If a new Investment Option is opened, a different option number will be assigned and new investment coupons will accompany your confirmation statement. You can also use the Additional Contribution by Mail form to contribute by check at any time.

5 Banking Information

You must provide the following information if you choose to contribute through the Automatic Contribution Plan (ACP) or the Electronic Purchase Option. Separate withdrawals from your bank account will be made for each Investment Option you have selected. Provide a pre-printed voided check or pre-printed deposit slip along with this form.

Type of Account (check one): <input type="checkbox"/> Checking <input type="checkbox"/> Savings	
Account Number:	Routing Number:
Name(s) on Account (The Account Owner, Custodian or Entity name must appear on the bank account.)	
Bank Name:	Telephone Number:

6 Signature and Authorization (You must sign this section for these changes to take effect.)

- I certify that all of the information provided by me on this form is true, complete and accurate.
- I certify that I have the authority to transact on the bank account listed by me in Section 4.
- I authorize the *Edvest College Savings Plan* to act on my instructions above, including to debit my bank account and to deposit such funds into my Plan Account, or to cease such debits, as requested on this form. If I authorize contributions through the Automatic Contribution Plan (ACP) or the Electronic Purchase Option on this form, I also hereby authorize the financial institution holding the bank account to any such debits to my Account without responsibility for the accuracy of the transaction. I further agree that neither the *Edvest College Savings Plan* nor its agents or contractors will be liable for any loss, liability, cost or expense for acting upon these instructions.

For Entity Accounts, if I am signing on behalf of an entity, I certify I am authorized by the entity Account Owner identified in Section 1 to act on its behalf.

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Account Owner, Custodian or Authorized Representative of Entity

Date

Important Information

A Signature Validation Program (SVP) Stamp is required for all entity Accounts and may be required for Accounts for which the individual completing this form is acting in a legal capacity as a representative of the individual Participant. You may be required to provide proof of your authority to act on behalf of this Account to your bank or broker before a Signature Validation Program Stamp will be provided.

Note: The Signature Validation Program Stamp is not required if a *Plan Power of Attorney Form* is on file for an Individual Account, or if a *Plan Power of Attorney Form* accompanies this form.

AFFIX STAMP HERE



Overnight Mail
Edvest College Savings Plan
30 Dan Road
Canton, MA 02021-2809

Mail to
Regular Mail
Edvest College Savings Plan
P.O. Box 55189
Boston, MA 02205-5189