Fund Transfer Form

(Transfers between Bright Directions® College Savings Program Accounts)

- Complete this form to transfer funds between your Bright Directions® College Savings Program Accounts.
- Return this completed form to:

Regular Mail:

Bright Directions College Savings Program
PO Box 82623
Lincoln, NE 68501

Overnight Mail:

Bright Directions College Savings Program
6811 South 27th Street
Lincoln, NE 68512

- **For assistance, call toll-free:** 866 – 722 – 7283 or contact your financial advisor

1 Account Information

Account Owner/ Custodian's First Name MI Last Name

Address City, State, ZIP

Phone _____

☐☐☐–☐☐–☐☐☐☐
Account Owner/Custodian's Social Security Number

2 Transfer Funds Between Bright Directions® College Savings Program Accounts

From Account ☐☐☐ ☐☐☐ ☐☐☐

_____
Beneficiary Name

To Account ☐☐☐ ☐☐☐ ☐☐☐

_____
Beneficiary Name

$ _____
Amount to Transfer

_____
Relationship Between Beneficiaries on the Accounts listed above

☐ Entire Balance ☐ Close Account

3 Authorization

I hereby authorize and direct the Transfer as defined by the Program Disclosure Statement of the Bright Directions® College Savings Program, indicated above. I certify that all the information contained herein is true and correct. I certify that I am the Account Owner on the accounts listed above. I acknowledge that the Transfer of funds in the Bright Directions® College Savings Program may have special tax consequences and that neither the Program Manager, the Illinois State Treasurer nor the Pool will be responsible for the tax consequences of any such transfer and that I fully understand the consequences of the Transfers under the laws governing the Bright Directions® College Savings Program.

X _____
Signature of Account Owner Date

(Print Name Here) _____