



Questions? Call 1-800-535-7829

<u>Instructions:</u> This document should be completed when an Investor would like to close an Account. Submit this form through Connect, or fax or mail this form to the fax number or address at the bottom of the page.

INVESTOR INFO	ORMATION: (All fields in this section	must contain Investor information ONLY.)		
Investor Name:			TIN:	
NU/ADA	•	ame that appears on Program records)	(Taxpayer	Identification Number)
NJ/ARM Accoun	nt Number:			
Does this Accou	nt have a Trustee? No Yes	(If yes, please have an authorized pers	on from the Trustee sign below.)	
Is this Account li	inked to a PFM Managed Account?	No Yes (If yes, your reque	est may take 24 hours for processing to calculate	outstanding fees.)
Outstanding Ch	arges: The amount of your final rede	mption may be reduced by any outsta	nding charges associated with your PFMAN	1 Managed Account.
TRANSACTION	I REQUEST:			
NJ/ARM Cl the bankin	g instructions listed below.		remaining balance plus any accrued divide	
			edetail instructions below.) (* = Optional fields	·
Wire Setup or A	•	ist already exist with the Program. I	o set up new instructions, complete and	submit either the
Ti	ransaction Type: WIRE	ACH Transfer to another N	IJ/ARM Account:	
ABA Routing Transit Number:		(Please list the NJ/ARM Account #) Bank Account Number:		,
*Ac	dditional Details:			
Final Cl	·	n Use Only)		
	(Flogran	r ose only)		
SIGNATURE: (P	Please have a Contact authorized per Pro	gram records sign below.)		
(for exan indi	cisting Accounts with no remaining baland cisting Accounts with a balance) a Contac	t who is currently authorized per Program r d position. Please include documentation (uthorized per Program records to open or close ecords to open or close Accounts and view and poard minutes, resolution, fiduciary agreement,	initiate transactions, OR
Authorized Signature		Date Phone #		
Print or Type Name of Authorized Signatory		Title/Position Email Address		
Any document cont	caining sensitive information rece <u>ived by</u>	email will not be accepted. Please send b	y uploading through Connect, fax, or mail.	PROGRAM USE ON
SEND VIA CONNECT:	Log in to Account Access	FAX TO: NJ/ARM Client Services Group	MAIL TO: NJ/ARM Client Services Group	V2022.03 INITIAL
Existing Connect Users Only	Click ☑ Secure Contact Select file to upload - Send message	1-800-252-9551	P.O. Box 11760 Harrisburg, PA 17108	Processed Confirmed

When an Account is closed, the Account is placed into an inactive status. Accounts may also be placed into an Inactive status if there is no balance or transactions for 366 consecutive days. Inactive Accounts may be reactivated within 365 days of being placed into an Inactive status. Investors should verify Account information such as addresses, statement recipients, and authorized Contacts on file when reactivating any Accounts. If the Account is in an Inactive status for 366 consecutive days it may not be reactivated for any reason.