



Add or Change a Successor Account Owner Form

Return this Form to:

Bright Start College Savings Program
P.O. Box 85298
Lincoln, NE 68501

Overnight Mail:

Bright Start College Savings Program
1248 O Street, Suite 200
Lincoln, NE 68508

If you have questions, please call us at **877.432.7444**, Monday–Friday, 7 a.m. to 7 p.m. (Central).

1. Current Account Information

Account Number: _____

Account Owner Name (First, Middle, Last): _____

Daytime Phone Number: _____

Evening Phone Number: _____

Name of Beneficiary: _____

2. Add or Change a Successor Account Owner

You may name a Successor Account Owner to take control of the Account in the event that the Account Owner dies or becomes legally incompetent.

- Remove the current Successor Account Owner without designating a new Successor Account Owner
- Add a new Successor Account Owner (This designation will replace the Successor Account Owner currently named on the Account)

Successor Account Owner Name (First, Middle, Last): _____

Successor Account Owner Date of Birth (MM/DD/YYYY): _____

Successor Account Owner City, State: _____

3. Authorization

By signing below, I certify that I am the Account Owner of the Account indicated on this form and that the information contained herein is true, complete, and correct.

Signature and Date Required	
<p>X _____</p> <p>Signature of Account Owner, Custodian (UGMA/UTMA Accounts), or Trustee</p> <p>_____</p> <p>Print Name Here</p> <p>_____</p> <p>Title (if other than an individual)</p>	<p>_____</p> <p>Date</p>

Michael W. Frerichs
ILLINOIS STATE TREASURER
Trustee & Administrator

UBT
Union Bank & Trust
Program Manager