

**Important information about this form:**

- A separate form is needed for each ABLE account.
- The Beneficiary or the Authorized Legal Representative must sign this form.
- Keep in mind that all communications are sent to the Beneficiary's address, even if an Authorized Legal Representative manages the ABLE account.
- You can't make withdrawals by check for 30 days following the change of your address unless either this form or the **Withdrawal Form** includes a Medallion Signature Guarantee (seen in **Step 5** of this form).

**Need help?**

Give us a call Monday – Friday  
from 9am – 5pm PT at  
**1-844-999-2253** or  
from 6am – 5pm PT at  
**1-844-888-2253 (TTY)**

**Mail the form to:**

Oregon ABLE Savings Plan  
P.O. Box 9891  
Providence, RI 02940-8091

**Overnight Mail:**

Oregon ABLE Savings Plan  
4400 Computer Drive  
Westborough, MA 01581

**1 ABLE account information**

\_\_\_\_\_  
Name of Beneficiary on the ABLE account (First and last)

\_\_\_\_ \_ - \_\_\_\_ \_ - \_\_\_\_ \_  
Beneficiary's Social Security or Taxpayer Identification Number

\_\_\_\_ \_ - \_\_\_\_ \_ - \_\_\_\_ \_  
Oregon ABLE Savings Plan account number

**2 Who is this address change for?**

(Select all that apply)

- The Beneficiary's residential address
- The Authorized Legal Representative's residential address
- Mailing address

### 3 New address

If the Beneficiary moves out of the state of Oregon, they can keep their ABLE account and continue to use it.  
If you're updating either the Authorized Legal Representative's or Beneficiary's address, it cannot be a P.O. box.

_____		_____	
Street address 1		Street address 2	
_____		_____	_____
City		State	ZIP Code
_____			
Telephone number			

### 4 Sign the form

By signing this form, you're confirming the information provided is true for the change of address.  
You can't make withdrawals by check for 30 days following the change of your address unless either this form or the **Withdrawal Form** include a Medallion Signature Guarantee.

_____	_____
Signature of Beneficiary or Authorized Legal Representative	Date (mm/dd/yyyy)

## 5 A Medallion Signature Guarantee is required for an address change

If you want to avoid a 30-day hold period for check withdrawals associated with a change in address, please have your signature guaranteed below.

**Keep in mind that:**

- You're providing the following information as underwritten certification that your signature is genuine.
- You can get a Medallion Signature Guarantee from an authorized officer of a bank, broker, or other qualified financial institution. A notary public doesn't qualify, and you cannot guarantee your own signature. You may be required to provide proof of your authority to act on behalf of the ABLÉ account.
- **Only sign if you are in the presence of an authorized officer providing the Medallion Signature Guarantee.**

I certify that the information provided herein is true and complete in all respects, and that I have read and understand, consent, and agree to all the terms and conditions of the **Plan Disclosure Booklet**.

\_\_\_\_\_  
Signature of Beneficiary or Authorized Legal Representative

\_\_\_\_\_  
Signature Guarantor

\_\_\_\_\_  
Title

\_\_\_\_\_  
Name of Institution

\_\_\_\_\_  
Date (mm/dd/yyyy)

**Have the Authorized Officer stamp here**