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DUNHAM & ASSOCIATES

WHEN PERFORMANCE COUNTS

CHANGE OF RIA/IAR REQUEST FORM
(FOR ASSET ALLOCATION PROGRAM ACCOUNTS)

Use this form to instruct Dunham to change the Registered Investment Adviser Firm and/or the Financial Representative on record for the account(s) listed below. *Note: Do not use this form to change the Broker-Dealer Firm or associated Financial Representatives for that Broker-Dealer Firm.*

1. Client Account Information

Account Owner's Name / Trustee/ Organization's Representative

Account Title

Joint Account Owner's Name / Trustee

Dunham Account Number(s):

						-									-		
						-									-		
						-									-		

2. Current Registered Investment Adviser Firm and Representative Information

Please give us information on the Registered Investment Adviser Firm and Representative you currently have on file at Dunham.

What are you changing? Mark all that apply.

- ☐ Registered Investment Adviser Firm on record
- ☐ Financial Advisor on record

Registered Investment Adviser Firm Name: ______________________

Financial Advisor Name: ______________________

Representative ID #: __________ Branch #: __________

3. New Registered Investment Adviser Firm and Financial Representative Information

Please give us information on the new Registered Investment Adviser Firm and Representative that Dunham's records should reflect. The new Registered Investment Adviser Firm MUST have a current and proper signed selling agreement with Dunham.

Registered Investment Adviser Firm

Firm Name

Home Office Address

City State Zip Code

Financial Advisor Information

Financial Advisor Name

Branch Office Address

City State Zip Code

Representative ID # Branch #

4. Authorization and Signature(s)

If multiple accounts are listed in Section 1 of this form, ALL account owners must sign below.

With respect the to above referenced account(s), the undersigned, as the authorized signatories, instruct Dunham to make the requested changes to the Registered Investment Advisory Firm and/or Registered Financial Representative on record with Dunham & Associated Investment Counsel, Inc. (“Dunham”), the Adviser (“Program Sponsor”) of the Dunham Asset Allocation Program (“AAP” or “the Program”).

We hereby ratify the existing Client Asset Allocation Agreement and Custodial Account Agreement associated with the Dunham Asset Allocation Program account listed above with the requested changes.

We agree that all other aspects of our participation in the Dunham Asset Allocation Program remain in full force and effect in accordance with the Application previously executed.

X____
Signature of Owner / Trustee / Business or Organization Signer Date

X____
Signature of Owner / Trustee / Business or Organization Signer Date

Mail completed forms to Dunham & Associates, Attn: Client Services, PO BOX 910309, San Diego, CA 92191