



# Invesco Investment Allocation Change Form

Use this form to change future investment allocation percentages to an existing Invesco retirement plan account.

- For 401(k), Solo 401(k), Profit Sharing and Money Purchase Plans, this form must be signed by the trustee(s) in section 4.
- For SEP, SARSEP, and SIMPLE IRAs, this form must be signed by the participant in section 4.

PLEASE USE BLUE OR BLACK INK

PLEASE PRINT CLEARLY IN BLOCK CAPITAL LETTERS

## 1 | Participant Information

Social Security Number (Required)	Invesco Account Number or Plan ID
<input type="text"/>	<input type="text"/>

Participant's Full Name (Please print name as it appears on account.)

Primary Phone Number	Email Address
<input type="text"/>	<input type="text"/>

### New Address

By providing the address below, I am directing Invesco Investment Services, Inc. (IIS) to update the address of record on file for the above referenced account.

Mailing Address (Account statements and confirmations will be mailed to this address.)

City	State	ZIP
<input type="text"/>	<input type="text"/>	<input type="text"/>

Residential Address (Required if different than your mailing address or if a P.O. Box address was given above.)

City	State	ZIP
<input type="text"/>	<input type="text"/>	<input type="text"/>

## 2 | Plan Information (Not applicable for IRAs)

Plan Name	Trustee's Full Name
<input type="text"/>	<input type="text"/>

Authorized Plan Contact's Full Name	Contact's Primary Phone Number
<input type="text"/>	<input type="text"/>

## 3 | Future Investment Elections

**Note:** If an Invesco fund name(s) is provided on the next page but no class of shares is specified, I am directing IIS to purchase Class A shares of the specified fund(s).

Select one.

- A.** All future contributions should be invested in share class \_\_\_\_\_ for the existing fund allocation choices.
- B.** All future contributions are to be invested as indicated on the following page.

**Please indicate fund(s) and the investment percentages, rounded to whole percentages.**

If you have additional fund selections, please attach a separate page that includes all of the information requested in this section.

Fund Number	Fund Name	Class of Shares	Percentage
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/> <input type="text"/> <input type="text"/> %
<b>Total percentage must equal 100%</b>			<b>TOTAL</b> <input type="text" value="1"/> <input type="text" value="0"/> <input type="text" value="0"/> %

**4 | Authorization and Signature(s)** *(Please sign and date below.)*

By signing this form, (i) I authorize and direct IIS to maintain the account referenced in section 1 in accordance with the instructions set forth in section 3, and (ii) I agree to indemnify and hold harmless IIS, its affiliates, each of their respective employees, officers, trustees, or directors, and each of the Invesco Funds from and against any and all claims, losses, liabilities, damages and expenses that may be incurred by reason of your actions taken in accordance with the instructions set forth herein.

**For 401(k), Solo 401(k), Profit Sharing and Money Purchase Plans, the trustee(s) must sign below.**

Plan Trustee's Signature <i>(Required)</i>	Name <i>(Please print)</i> and Date (mm/dd/yyyy)
<input type="text" value="X"/>	<input type="text"/>
Plan Trustee's Signature	Name <i>(Please print)</i> and Date (mm/dd/yyyy)
<input type="text" value="X"/>	<input type="text"/>

**For SEP, SARSEP, and SIMPLE IRAs, the participant must sign below.**

Participant's Signature <i>(Required)</i>	Date (mm/dd/yyyy)
<input type="text" value="X"/>	<input type="text"/>

**5 | Mailing Instructions**

Please send completed and signed form to:

**(Direct Mail)**  
 Invesco Investment Services, Inc.  
 P.O. Box 219078  
 Kansas City, MO 64121-9078

**(Overnight Mail)**  
 Invesco Investment Services, Inc.  
 c/o DST Systems, Inc.  
 430 W. 7th Street  
 Kansas City, MO 64105-1407

**For additional assistance please contact an Invesco Client Services representative at 800 959 4246, weekdays, 7 a.m. to 6 p.m. Central Time.**

**Visit our website at [invesco.com/us](http://invesco.com/us) to:**

- Check your account balance
- Confirm transaction history
- View account statements and tax forms
- Sign up for eDelivery of statements, daily transaction statements, tax forms, prospectuses, and reports
- Check the current fund price, yield and total return on any fund
- Process transactions
- Retrieve account forms and investor education materials

**Call the 24-Hour Automated Investor Line 800 246 5463 to:**

- Obtain fund prices
- Confirm your last three transactions
- Order a recent account statement(s)
- Check your account balance
- Process transactions

To use the system, please have your account numbers and Social Security number available.