



GUIDESTREAM  
CHARITABLE  
GIFT FUND

**CHANGE FORM**  
**NAME OF ACCOUNT**

*Current Name of Account* \_\_\_\_\_

*New Name Requested* \_\_\_\_\_

I/We request that the name of my/our GuideStream Charitable Gift Fund account be changed as specified above. I/We understand the new name will be used on all documentation (account statements, letters accompanying gifts, etc.) as of the date it is approved by GuideStream Charitable Gift Fund below. I/We understand that the account number will continue to be the same to preserve the history of the account.

All original donors on the account must sign this form.

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature – Original Donor 1

\_\_\_\_\_  
Signature – Original Donor 2

\_\_\_\_\_  
Print Name – Original Donor 1

\_\_\_\_\_  
Print Name – Original Donor 2

**Internal Use Only:**

*Account Number:* \_\_\_\_\_

*Accepted by:* \_\_\_\_\_ *Date* \_\_\_\_\_  
President/CEO or Chairman, GuideStream Charitable Gift Fund

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