



STATE FARM FUNDS NAME CHANGE

Please complete this form in order to update the name on your State Farm Funds account. **Please note: The form must be signed and medallion signature guaranteed in Section 2.** If you have any questions or need additional information before completing this form, please call **800-447-0740**.

Please print all information.

1 NAME CHANGE

ACCOUNT NUMBER (REQUIRED)

PREVIOUS (OLD) NAME - FIRST

MIDDLE

LAST

LAST 4 OF SSN

CURRENT (NEW) NAME - FIRST

MIDDLE

LAST

DAYTIME PHONE NUMBER

2 SIGNATURES/MEDALLION SIGNATURE GUARANTEE

PREVIOUS (OLD) SIGNATURE

CURRENT (NEW) SIGNATURE

TELEPHONE (INCLUDE AREA CODE)

SOCIAL SECURITY NUMBER

Note: Forms containing medallion signatures must be mailed.

Mail or fax completed form to:

**State Farm Funds
P.O. Box 4766
Chicago, IL 60680-4766**

Fax: 312-557-3093

Financial Institution: Place Medallion Signature Guarantee stamp here.