



**Virtus Mutual Funds**  
 PO Box 534470  
 Pittsburgh PA 15253-4470

**Broker/Dealer Change  
 Request Form**

For assistance, please contact us at 800-243-1574 or visit our website at Virtus.com.

**1. Account Information**

Shareholder Name(s)/Account Registration \_\_\_\_\_ U.S. Social Security Number \_\_\_\_\_

Address \_\_\_\_\_ Email Address \_\_\_\_\_

City, State, ZIP Code \_\_\_\_\_ Fund and Account Number(s) \_\_\_\_\_

Mobile Telephone Number \_\_\_\_\_ Evening Telephone Number \_\_\_\_\_

- By checking the preceding box, I authorize Virtus Mutual Funds to replace any conflicting information and/or add any missing information to my account records, with regard to the address, email address and telephone numbers provided in this section.

**2. Dealer (Financial Professional) Information**

Please process one of the following options:

- Remove the current Broker/Dealer information from my account(s). If I have not named a new Broker/Dealer, VP Distributors, LLC, Virtus's default Broker/Dealer will be assigned to the account.
- Update the Broker/Dealer on my account(s), as follows:

Dealer Name \_\_\_\_\_ Dealer Number \_\_\_\_\_

Branch – Street Address \_\_\_\_\_ Branch Number \_\_\_\_\_

Branch – City, State, ZIP Code \_\_\_\_\_ Branch Telephone Number \_\_\_\_\_

Dealer Name \_\_\_\_\_ Dealer Number \_\_\_\_\_

Representative Name \_\_\_\_\_ Representative Number \_\_\_\_\_

Representative Email Address \_\_\_\_\_ Representative Telephone Number \_\_\_\_\_

### 3. Authorizing Signature(s)

**All shareholders listed in the account registration must sign this form exactly as the account(s) is registered.**

No information provided by the Virtus Mutual Funds shall be considered to be or is advice on which I/we may rely as the primary basis for my/our investment decisions. I/We agree that I/we need to make my/our own decisions, with whatever third-party advice I/we wish to obtain, and I/we agree that I/we are not to rely on any information Virtus Mutual Funds is providing as advice that is a primary basis for my/our decisions. I/We expressly confirm, and by signing below, I/we acknowledge, that none of Virtus Mutual Funds, their distributor, their transfer agent, and their affiliates, has made or is making a recommendation, or has provided or is providing investment advice of any kind whatsoever (whether impartial or otherwise), or is giving any advice in a fiduciary capacity with any decision I/we may make to invest or otherwise proceed with Virtus Mutual Funds.

I/We hereby authorize Virtus Fund Services, or its duly authorized agents, as agent for Virtus Mutual Funds, to honor any requests made in accordance with the instructions on this form, and I/we further affirm that neither Virtus Fund Services ("Transfer Agent") nor Virtus Mutual Funds shall be held liable for any loss, liability, cost or expense for acting in accordance with these instructions.

I/We authorize Virtus Mutual Funds and its agents to act upon instructions (by phone, in writing, on-line or by other means) believed to be genuine and in accordance with the procedures described in the prospectus for this account or any account into which exchanges are made. I/We agree that neither Virtus Mutual Funds nor the Transfer Agent will be liable for any loss, cost or expense for acting on such instructions, provided that the Transfer Agent employs reasonable procedures to confirm that instructions communicated are genuine. I/We understand that I/we bear the risk from instructions given by an unauthorized third party that the Transfer Agent reasonably believes to be genuine.

By signing below, if there is a financial professional assigned to my existing account(s) listed above or any new account established under the same primary Social Security number in the future, I/we hereby authorize the listed individual(s) to act on my/our behalf with respect to my/our account(s) in all aspects, including without limitation initiating contact specifically for the purposes of unclaimed property laws.

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date