COLLEGE SAVINGS PLAN of Nebraska

Fund Transfer Form

(Transfers between College Savings Plan of Nebraska Accounts)

- Complete this form to transfer funds between your College Savings Plan of Nebraska Accounts.
- Return this completed form to:

Regular Mail:
College Savings Plan of Nebraska
PO Box 82644
Lincoln, NE 68501

Overnight Mail:
College Savings Plan of Nebraska
6811 South 27th Street
Lincoln, NE 68512

- **For assistance, call toll-free:** 888 – 993 – 3746

1 Account Information

Account Owner/ Custodian's First Name _____ MI _____ Last Name _____

Address _____ City, State, ZIP _____

Phone _____

☐☐☐ – ☐☐ – ☐☐☐☐
Account Owner/Custodian's Social Security Number

2 Transfer Funds Between College Savings Plan of Nebraska Accounts

From Account ☐☐☐ ☐☐☐ ☐☐☐

_____
Beneficiary Name

To Account ☐☐☐ ☐☐☐ ☐☐☐

_____
Beneficiary Name

$ _____
Amount to Transfer

_____
Relationship Between Beneficiaries on the Accounts listed above

☐ Entire Balance ☐ Close Account

3 Authorization

I hereby authorize and direct the Transfer as defined by the Enrollment Handbook of the College Savings Plan of Nebraska, indicated above. I certify that all the information contained herein is true and correct. I certify that I am the Account Owner on the accounts listed above. I acknowledge that the Transfer of funds in the College Savings Plan of Nebraska may have special tax consequences and that neither the Program Manager, the Nebraska State Treasurer nor the Trust will be responsible for the tax consequences of any such transfer and that I fully understand the consequences of the Transfers under the laws governing the College Savings Plan of Nebraska.

X _____
Signature of Account Owner Date

(Print Name Here) _____