



1 Information about the current custodian

First name MI Last Account number (if known)

Address City State ZIP

Email address* () Daytime phone

☐ Check here to update the mailing address on your account(s).

*Your privacy is important to us. For information on our privacy policies, visit www.capitalgroup.com.

2 Successor custodian information

Name of successor custodian (print) Relationship to minor

SSN Date of birth (mm/dd/yyyy)

3 Signatures

As current custodian for the above-referenced account, I hereby designate the individual named in Section 2 as successor custodian to succeed my duties as custodian, to be effective upon my resignation, death, incapacity or removal as custodian.

This instrument is being executed under the Uniform Gift to Minors Act (UGMA) or Uniform Transfers to Minor Act (UTMA) for the following state:

State

This document may not be signed using Adobe Acrobat Reader's "fill and sign" feature.

X

Signature of current custodian — Required Date (mm/dd/yyyy)

X

Signature of witness — Required Name of witness (print)

Note: The witness cannot be the person named as current custodian or successor custodian in Section 2 above.

If mailing, choose the service center for your state. Mail the form to the Indiana Service Center if you live outside the U.S.



American Funds Service Company
P.O. Box 6007
Indianapolis, IN 46206-6007

Overnight mail address
12711 N. Meridian St.
Carmel, IN 46032-9181



American Funds Service Company
P.O. Box 2280
Norfolk, VA 23501-2280

Overnight mail address
5300 Robin Hood Rd.
Norfolk, VA 23513-2430

Financial professional upload www.capitalgroup.com/upload

Fax (888) 421-4351

For more information, contact your financial professional, visit www.capitalgroup.com or call us at (800) 421-4225.