



Address Verification Form

TD Ameritrade Account #: _____

PO Box 2760 ■ Omaha, NE 68103-2760
Fax: 866-468-6268

Please complete this form to allow us to better serve your account. You may also update your address online. Log in to your account and click "My Profile," select the "Personal Information" tab, go to "Personal information," and click on "Edit."

1. PHYSICAL ADDRESS (NO PO BOX OR MAIL DROP)

Street Address: _____

City: _____	State: _____	ZIP Code: _____
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Country (if applicable): _____

2. MAILING ADDRESS (OPTIONAL)

Only complete if you wish to change your mailing address.

Street Address: _____

City: _____	State: _____	ZIP Code: _____
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Country (if applicable): _____



3. EMAIL ADDRESS (OPTIONAL)

Please provide an email address so we may better serve you.

Email Address: _____

4. AUTHORIZATIONS

Please note: All Account Owners and Authorized Agents must sign below.

 Account Owner's Signature: _____	Date: _____
 Account Co-Owner's Signature: _____	Date: _____
 Authorized Agent's Signature: _____	Date: _____
 Authorized Agent's Signature: _____	Date: _____

Original signatures required, electronic signatures and/or signature fonts are not authorized.

Investment Products: Not FDIC Insured * No Bank Guarantee * May Lose Value

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