

For assistance, please contact our CollegeAccess 529 Plan Investor Services at 866-529-7462, Monday through Thursday, 8:30am – 6:00pm and until 5:00pm on Friday, or visit our website at CollegeAccess529.com.

Please send the completed form and payment, if applicable, to one of the following:

**Regular Mail**  
College Access 529  
P.O. Box 534436  
Pittsburgh, PA 15253-4436

**Overnight Mail**  
College Access 529  
Attn: 534436  
AIM: 154-0520  
500 Ross Street  
Pittsburgh, PA 15262

**\*\*Fax**  
844-751-0047

\*\*The form may be faxed if a fee is not required or if the fee is to be deducted from an active account.

### 1. Requestor Information

Name(s)	Daytime Telephone Number
Address	Alternate or Cell Number
City, State, ZIP Code	Email Address

### 2. Transcript Fees

For each request, the following fees are applicable per account owner and may include all accounts owned by that individual:

- The last 7 years, including the current year, are free.
- \$5.00 per year going back to 2010. This fee will not exceed \$25.00, regardless of the number of years.

### 3. Account Information

If you are requesting a complete history but are unsure of the year that the account was opened, please include the approximate year or contact our office for the establishment date prior to submitting your request. Please list ALL fund and account numbers for which you are requesting a complete history. If there is not sufficient space below, please list the additional account information on the back side of this form.

**Portfolio/Account Number:** \_\_\_\_\_ OR  All portfolios under the account number

Full Names of Account Owner and Designated Beneficiary	Requested Years
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