



## Advisor Change Form

In order to appoint an advisor to a donor advised fund, we ask that you, the founder of the fund, please complete and return this form to the Southeast Virginia Community Foundation.

Founder Name: \_\_\_\_\_ Date: \_\_\_\_\_

Name of Fund: \_\_\_\_\_ Fund #: \_\_\_\_\_

As the founder of the above-named fund, I appoint the following individual(s) as fund advisors:

1. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship: \_\_\_\_\_

This Advisor will serve as a:  Current Advisor  Successor Advisor

Delete Advisor  Change of Address Only

2. Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email: \_\_\_\_\_

Relationship: \_\_\_\_\_

This Advisor will serve as a:  Current Advisor  Successor Advisor

Delete Advisor  Change of Address Only

I certify that the above-listed advisor(s) has/have the same privileges in making grant suggestions that I do without the consent of me or any other advisor(s) to the extent that the fund agreement permits. I understand that it is the responsibility of the advisors to communicate with one another and that I reserve the right to revoke any/all fund advisor privileges from any/all of the above-listed individuals.

\_\_\_\_\_  
Name (Printed)

\_\_\_\_\_  
Signature