



## INVESTOR ADDRESS CHANGE REQUEST

PLEASE PRINT CLEARLY AND COMPLETE ALL INFORMATION

Investor Number: \_\_\_\_\_

Name: \_\_\_\_\_

Fund Name: \_\_\_\_\_

New Daytime Phone # \_\_\_\_\_

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

### LEGAL STREET ADDRESS REQUIRED

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

Additional Mailing Option for a PO Box: \_\_\_\_\_

City, State & Zip: \_\_\_\_\_

Effective Date: \_\_\_\_\_

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

\_\_\_\_\_  
Investor Signature \_\_\_\_\_ Date \_\_\_\_\_ or \_\_\_\_\_  
Financial Advisor Signature \_\_\_\_\_ Date \_\_\_\_\_  
(May sign in lieu of investor(s))

\_\_\_\_\_  
Investor Signature \_\_\_\_\_ Date \_\_\_\_\_

WHEN COMPLETED PLEASE PRINT AND MAIL TO:

Prospect Floating Rate and Alternative Income Fund, Inc.  
**c/o Phoenix American Investor Services**  
P.O. Box 2189  
San Rafael, CA 94912-2189  
Fax: 415-485-4553