



**ADDRESS/OR TELEPHONE CHANGE AUTHORIZATION**

Send to:  
Terra Income Fund 6, Inc.  
c/o DST Systems  
PO Box 219686  
Kansas City, MO 64121-9686  
Fax: (855) 247-7429

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

[ ] TERRA INCOME FUND 6, INC.

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

Terra Income Fund 6 Account Number: \_\_\_\_\_

Please use this form as your authorization until further notice to change my address on my account:

FROM: \_\_\_\_\_

TO: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Phone #: \_\_\_\_\_

Phone #: \_\_\_\_\_

Signature: \_\_\_\_\_

Signature: \_\_\_\_\_

(If this is a Joint account, both parties must sign)

Printed Name(s): \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
(Internal Authorized Signature)