



Eaton Vance Mutual Funds

Return to: PFPC, Inc., Eaton Vance Group, P.O. Box 9653, Providence, RI 02940-9653
Overnight Mail: 101 Sabin Street, Pawtucket, RI 02860

This application is for use only with existing accounts in the Eaton Vance Family of Funds.

Change of Dealer Form

Please change the name of my dealer on your records to the one whose authorized signature appears below. The details of my account are as follows:

1 COMPLETE YOUR EXISTING ACCOUNT INFORMATION

Name of Fund

Account Number

2 REGISTRATION OF ACCOUNT

Name(s):

Address

City

State

Zip Code

3 SIGNATURE

The signatures on this form must correspond exactly with the account registration.

Signature of Owner

Date

Signature of Joint Owner (if applicable)

Date

THIS SECTION MUST BE COMPLETED BY YOUR DEALER

This firm agrees to act as Dealer under the above-mentioned Account in accordance with the provisions set forth in the original application. We guarantee the above signature(s).

Dealer Name

Representative's Number and Last Name

Branch Office Location - Street Address

Branch Number

City

State

Zip Code

Authorized Signature of Dealer

If you have any questions about this form, please call 1-800-225-6265, extension 3 between 8:30 a.m. and 8:00 p.m. Eastern Time.