

Investor Change of Address and/or Alternate Distribution Form



Atlas Resources, LLC

Please Remit To:
Investor Services
Atlas Resources, LLC
fax: 412-262-7430
tel: 800-251-0171 opt. 3
investorservices@atlasenergy.com
Park Place Corporate Center One
1000 Commerce Dr., Suite 410
Pittsburgh, PA 15275

Investor Name: _____

List all Partnerships: _____

Atlas ID No: _____ or Social Security Number: _____

Address Change: Circle Type of Change: Permanent Temporary

From (Date): _____ To (Date): _____

Current Address: Address Line 1: _____

Address Line 2: _____

City/State/Zip: _____

New Address: Address Line 1: _____

Address Line 2: _____

City/State/Zip: _____

Phone: _____

Email: _____

Electronic Transfer via ACH (Automatic Clearing House) not for wire use

Name of Financial Institution: _____

ABA/Routing Transit Number (required nine digits): _____

Account Number: _____

Investor Name: _____

Circle Account Type: Checking Savings/Money Market Brokerage

(VOIDED CHECK OR BANK/BROKERAGE VERIFICATION REQUIRED FOR PROCESSING)

Alternate Mailing Address: (i.e., P.O. Box, alternate mailing or financial institution address)

Payee: _____

FBO: _____

Address: _____

City/State/Zip: _____

Account Number: (if applicable) _____

Investor Signature (required) _____ Date: _____

Printed Name: _____ Printed Name: _____

Signature: _____ Signature: _____

Office Use Only

Date Received: _____ Date Entered: _____ Entered By: _____