HSA BANK
National Leader in Health Savings Accounts.
A Division of Webster Bank, N.A., Member FDIC

Health Savings Account Investment Change Form

HealthSavings ADMINISTRATORS

Instructions: Complete this form and mail or fax it to: **Health Savings Administrators, 10800 Midlothian Turnpike, Suite 240, Richmond, VA 23235, FAX (804) 726-1570.** For assistance, call (888) 354-0697, Monday - Friday, 8:30 a.m. - 5 p.m., ET.

Account Holder Name: _____ Account Number: _____

Please make the following change(s) in my Health Savings Account (HSA):

CHANGE CURRENT INVESTMENT/CHECKING OPTIONS

You may only choose from the 22 funds listed on the "Vanguard Funds List" section of our website. You may move money between mutual funds or between the mutual funds and the debit card account. Use this section of the form to exchange all share or dollars between funds and/or the debit card account. You may diversify your HSA account into more than one fund.

I authorize Health Savings Administrators to exchange funds within my health savings account as described below: (*Indicate amount in either whole percentages OR dollars*)

Amount		Existing Fund		Destination Fund
_____	From	_____(fund name)	To	_____ (fund name)
_____	From	_____(fund name)	To	_____ (fund name)
_____	From	_____(fund name)	To	_____ (fund name)
_____	From	_____(fund name)	To	_____ (fund name)
_____	From	_____(fund name)	To	HSA Bank Debit Card**

_____**Check here to order a debit card if you do not already have one.

ALLOCATE FUTURE CONTRIBUTIONS TO YOUR HSA

Please distribute all future contributions in the following proportions. You may choose up to four (4) funds in addition to the debit card. Totals must add to 100%. (*Indicate amount in either whole percentages.*)

_____% - Fund Name _____Symbol _____

_____% - Fund Name _____Symbol _____

_____% - Fund Name _____Symbol _____

_____% - Fund Name _____Symbol _____

_____% - HSA Bank Debit Card

100 %

I understand that I will be charged a quarterly fee of .0008 times my Vanguard Mutual Fund account balance on balances up to $20,000 per fund. _____ (initial)

If you choose the Vanguard Account, the mutual fund investment option for your Health Savings Account, please carefully consider each fund's investment objectives, risks, fees and expenses before investing. The funds' prospectuses, which should be read carefully before you invest or send money, contain this and other important information. The "Vanguard Funds List" section of our website contains links to the prospectuses and fact sheets for the funds. You may also obtain a prospectus by contacting a fund directly. Past fund performance is no guarantee of future results. The funds (i) are not bank deposits, nor insured by the FDIC, (ii) are not obligations of, endorsed by, or guaranteed by HSA Bank or any other bank or savings institution, (c) are not guaranteed by the federal government or any federal governmental agency, and (d) will fluctuate in value and may be sold for more or less than the amount invested.

Please note that investing in the Vanguard Funds is not a requirement and that investing in mutual funds involves risks. You may instead choose to invest in an HSABank Debit Card Account. Accountholders are urged to carefully weigh the advantages and disadvantages of investing HSA funds in an mutual funds versus holding them in a debit card account. All Health Savings Accounts, whether invested in a Vanguard Account or a Debit Card Account, are custodial accounts with HSA Bank serving as the custodian.

HSA Bank is not a registered investment advisor, nor is it acting in the capacity of a registered investment advisor with respect to the offering of HSA Bank Vanguard Accounts. Under no circumstances is HSA Bank or Health Savings Administrators offering any of the mutual funds available for the HSA Vanguard Accounts, and neither HSA Bank nor Health Savings Administrators is making any representations or warranties with respect to any of the available funds. HSA Bank and Health Savings Administrators disclaim any and all liability, contingent or otherwise, for the performance of the available mutual funds. Please see your financial advisor for personal investment advice.

Signature of Account Holder _____ Date _____