

ELECTRONIC DELIVERY CHANGE / OPT-OUT REQUEST FORM

Institutional Advisor Services



SECTION 1 General Instructions

Purpose of form: Use this form to opt-out of or change electronic delivery (e-delivery) of all account documents made available for electronic delivery by Trust Company of America (TCA).

Print or type all entries. Print clearly in all CAPITAL LETTERS to complete this application. To type entries, a fillable PDF of this form can be found online at www.trustamerica.com/advisor-forms.

IMPORTANT: You must complete all required fields and provide all required signatures to expedite processing and to avoid requests for additional information. **A valid email address is required for all change requests.**

Note: If you are a member of a statement family, only the Primary Account Holder can opt in/out of electronic delivery.

SECTION 2: Request Type

Make a selection to change your email address, or discontinue electronic delivery.

Select all that apply:

- Change email address
- Discontinue Electronic Statements Delivery
- Discontinue Electronic Proxy

SECTION 3: Account Owner Information

IMPORTANT: If you have accounts with multiple advisors at TCA, please complete one form for each advisor.

Primary TCA Account Number _____ Last 4 digits of SSN _____

Account Title _____

Account Title (continued) _____

Investment Advisor/Money Manager Firm Name _____

Email Address

SECTION 4: Additional Account Information, if applicable

IMPORTANT: If multiple accounts for the same account owner are listed below, only one signature is required, otherwise, all owners must sign.

TCA Account Number _____

Account Title _____

Print Name _____



SECTION 4: Additional Account Information, if applicable (Cont.)

TCA Account Number _____

Account Title _____

Print Name _____

TCA Account Number _____

Account Title _____

Print Name _____

TCA Account Number _____

Account Title _____

Print Name _____

Additional accounts attached.

SECTION 5: Account Owner Authorization

If you do withdraw your consent you will begin receiving paper copies of your statements and/or proxy at the applicable cost.

As account owner, I hereby request that my electronic delivery election be updated. I attest that I will hold TCA harmless from any loss, claim, expense or other liability for this action.

Account Owner Signature _____

Date _____

For a custodial account, the custodian or guardian must sign.

Print Name _____

Joint Owner Signature (if applicable) _____

Date _____

Print Name _____

Additional Account Owner Signature _____

Date _____

Print Name _____

-End of Form-