

**SECTION 1: General Instructions**

Use these instructions to complete the Statement Family Request form.

**Purpose of form:** Use this form to add accounts to or remove accounts from a statement family.

**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](http://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.

**SECTION 2: Request Type**

Select one:

- Create a new Statement Family
- Delete an existing Statement Family
- Include/Remove account(s) to an existing Statement Family

**SECTION 3: Primary Account Holder Information**

**IMPORTANT:** If you have accounts with multiple advisors at Trust Company of America, only the accounts managed by a single investment advisor may be placed in a statement family.

\_\_\_\_\_  
 Primary Account Number

\_\_\_\_\_  
 Account Title

\_\_\_\_\_  
 Account Title (continued)

\_\_\_\_\_  
 Last 4 digits of Social Security or Tax Identification Number

\_\_\_\_\_  
 Investment Advisor

**SECTION 4: Primary Account Holder Authorization**

As account owner of the primary account, I hereby acknowledge the request to add accounts to my statements. I further attest I will hold Trust Company of America harmless from any loss, claim, expense, or other liability for this action.

\_\_\_\_\_  
 Account Owner's Signature (Trustee, Custodian, etc)      Date

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Account Owner's Signature (Joint Owner, Trustee, etc)      Date

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Trust Company Account Number

**SECTION 5: Account Information and Authorization to Add**

**IMPORTANT:** If multiple accounts for the same account owner are listed below, only one signature is required.

I authorize Trust Company of America to affiliate my account statement referenced below to the party listed as primary account in Section 3. I understand I will no longer receive a statement as a result of this action.

I understand that the primary account of the family is electing the method of delivery and that the primary account can designate a new primary account without further authorization from the other family members.

I further attest I will hold Trust Company of America harmless from any loss, claim, expense or other liability for this action. If at some later time I wish to discontinue having my statement sent to the primary account, I must send new written instructions to Trust Company of America to make this change.

\_\_\_\_\_  
 Trust Company Account Number

\_\_\_\_\_  
 Account Title

\_\_\_\_\_  
 Signature of Account Owner

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Trust Company Account Number

\_\_\_\_\_  
 Account Title

\_\_\_\_\_  
 Signature of Account Owner

\_\_\_\_\_  
 Print Name

\_\_\_\_\_  
 Trust Company Account Number

\_\_\_\_\_  
 Account Title

\_\_\_\_\_  
 Signature of Account Owner

\_\_\_\_\_  
 Print Name

Additional account information and signatures provided

Trust Company of America  
Institutional Advisor Services  
**STATEMENT FAMILY REQUEST**



**SECTION 6: Account Information and Authorization to Remove**

**IMPORTANT:** If multiple accounts for the same account owner are listed below, only one signature is required.

I authorize Trust Company of America to remove my account statement referenced below from the party listed as primary account in Section 3.

I further attest I will hold Trust Company of America harmless from any loss, claim, expense or other liability for this action. If at some later time I wish to have my statements sent to the primary account, I must send new written instructions to Trust Company of America to make this change.

Trust Company Account Number

**-End of Form-**

\_\_\_\_\_  
**Trust Company Account Number**

\_\_\_\_\_  
Account Title

\_\_\_\_\_  
Signature of Account Owner

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
**Trust Company Account Number**

\_\_\_\_\_  
Account Title

\_\_\_\_\_  
Signature of Account Owner

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
**Trust Company Account Number**

\_\_\_\_\_  
Account Title

\_\_\_\_\_  
Signature of Account Owner

\_\_\_\_\_  
Print Name

\_\_\_\_\_  
**Trust Company Account Number**

\_\_\_\_\_  
Account Title

\_\_\_\_\_  
Signature of Account Owner

\_\_\_\_\_  
Print Name

Additional account information and signatures provided