STATEMENT FAMILY REQUEST

Institutional Advisor Services

SECTION 1: General Instructions

Use these instructions to complete the Statement Family Request form.

Purpose of form: Use this form to create a Statement Family or 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.axosadvisorservices.com.

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 Modify an existing Statement Family, select at least one below:	
 ☐ Add account(s) to an existing Statement Family ☐ Remove account(s) from an existing Statement Family ☐ Change Primary Account number to:(current primary must sign this form) 	
SECTION 3: Primary Account Holder Information	
IMPORTANT: If you have accounts with multiple advisors at Axos Advisor Services, only the accounts managed by a single investment advisor may be placed in a Statement Family.	
Primary Account Number	
Desired Statement Family Name	
Account Registration	
Account Registration (continued)	
Last 4 digits of Social Security or Tax Identification Number	
Investment Advisor	
SECTION 4: Additional Statement Family Accounts	
1. Select one: ☐ Add ☐ Remove	
Axos Advisor Services Account Number	
Account Registration	
2. Select one: Add Remove	
Axos Advisor Services Account Number	
Account Registration	
3. Select one: ☐ Add ☐ Remove	
Axos Advisor Services Account Number	
Account Registration	
4. Select one: ☐ Add ☐ Remove	
Axos Advisor Services Account Number	
Account Registration	



Date

Axos Advisor Services Account Number

SECTION 5: Account Holder Authorizations and Signatures

Primary Account Owner Authorization

As account owner, I/we hereby designate the account named in Section 3 as the Primary Account for the Statement Family. I/We request Axos Advisor Services to modify the Statement Family as indicated in Section 4. I/We attest that I/we will hold Axos Advisor Services harmless from any loss, claim, expense, or other liability for this action.

Added Account Owner Authorization

Primary Account Owner's Signature

I hereby certify that the account(s) referenced in Section 4 is(are) managed by the Investment Advisor named in Section 3, and I authorize Axos Advisor Services to modify the Statement Family for the Primary Account designated in Section 3. I understand that I will no longer receive account statements as a result of this action. I further understand that the account owner of the Primary Account for the Statement Family will elect the method of statement delivery and can designate a new Primary Account without further authorization from the other members of the Statement Family.

I further attest I will hold Axos Advisor Services 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 Axos Advisor Services to make this change.

Print Name		
Joint Account Owner's Signature (if applicable)	Date	
Print Name		
All Other Account Owners Included in Primary Account Owner's Statement Family, Sign Below		
Account Owner's Signature	Date	
Print Name		
Account Owner's Signature	Date	
Print Name		
Account Owner's Signature	Date	
Print Name		
Account Owner's Signature	Date	
Print Name	I	
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