

## TRUSTED CONTACT AUTHORIZATION FORM

A Trusted Contact is a person (or several people) you select so that we can communicate with them about you or your accounts at our firm, when we deem it appropriate.

If you sign this form, you're allowing RetireOne Investment Services, LLC to contact your Trusted Contact(s) for the following reasons:

- We are unable to contact you about your accounts.
- There are questions or concerns about your whereabouts or health status.
- We suspect that you may be a victim of fraud or financial exploitation.
- We suspect that you might no longer be able to manage your financial affairs.
- We want to confirm the identity of any legal guardian, executor, trustee, authorized trader or holder of a Power of Attorney to whom you have given rights regarding your accounts.
- We have any other reasonable concerns.

By signing this form, you authorize RetireOne Investment Services and its employees to communicate, verbally or in writing, with the Trusted Contact(s) listed below. This Authorization does not authorize the Trusted Contact(s) to issue us trade or other instructions in relation to your accounts, nor does it permit them to withdraw or transfer funds. By signing this form, you further agree that (1) this Authorization does not impose any obligation or requirement that we contact or communicate with your Trusted Contact(s); (2) this Authorization is not a Power of Attorney or trade authorization and does not authorize the Trusted Contact(s) to make any investment decisions or transact any business with us on your behalf; (3) this Authorization is optional and you may change or withdraw it at any time by notifying us in writing; (4) the Trusted Contact(s) are 18 years of age or older; and (5) RetireOne Investment Services is released and discharged from all claims, causes of action, damages, losses, expenses, costs and liabilities of any kind that may arise out of, relate to or be in connection with the release of, or failure to release, personal and/or account information of all types to the Trusted Contacts.

This form allows you to name two Trusted Contact Persons. You can name additional Trusted Contact Persons by completing and signing additional Authorizations.

Trusted Contact #1 (please print)

Name

Relationship

Email

Street Address

City, State

Zip

Phone

Trusted Contact #2 (please print)

Name

Relationship

Email

Street Address

City, State

Zip

Phone

Client Signature

Date

Client's Printed Name