

**Investment Advisor ("IA") Information (This portion to be completed by IA.)**

IA Firm Name (please print): \_\_\_\_\_

IA Master Account Number: \_\_\_\_\_ Service Team: \_\_\_\_\_

By enrolling in Schwab MoneyLink, you are establishing a standing authorization to request electronic funds transfers between your Schwab account ("Schwab Account") and the account at another U.S. financial institution specified below ("Other Account") (collectively, the "Service"). You may also authorize your IA to request such transfers on your behalf by completing Section 3; however, please note that you must be an account holder on both accounts to enable your IA to request transfers from the Other Account to your Schwab Account. Please allow three weeks after Schwab receives this form before requesting your first transfer. In the event that you require funds sooner than three weeks, please also complete the Wire Transfer Letter of Authorization with Standing Instructions form to allow you and/or your IA to request wire transfers to your bank account as needed. Generally, two business days are required to complete a MoneyLink transfer. MoneyLink is not available for some account registrations; please contact your IA for more information.

**Please Note: For IRA distributions, please use the Schwab Institutional® IRA & ESA Distribution Form.**

**1. Schwab Account Information** (Please select all that apply.)

- Set Up New Instructions    Set Up Additional Instructions    Change Existing Instructions    Terminate Existing Instructions

Schwab Account Number: \_\_\_\_\_

Name(s) on Schwab Account (list all names on the account): \_\_\_\_\_

**2. Other Financial Institution Account Information and Authorization**

All owners of the Other Account must sign Section 7.

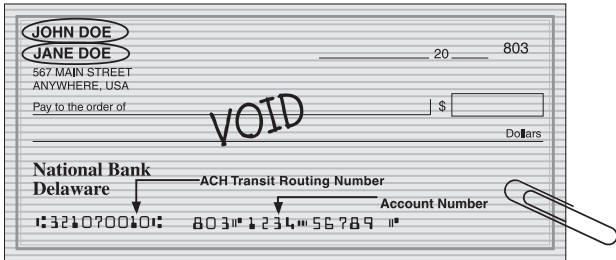
**Note:** Corporate, partnership or other organization accounts require signatures from at least two authorized agents. In addition, if the account at the other financial institution is a corporation, partnership, sole proprietor or other organization account and is not identically registered to the Schwab Account, a copy of the corporate resolution, partnership or sole proprietor letter, organization paperwork, or a signed letter from the bank (on bank letterhead with authorized signers and pertinent account information listed) is required to determine authorized signers.

Other Account Number: \_\_\_\_\_

**A. Bank/Financial Institution Information**

- This is a:  Personal Checking Account    Corporate/Organization Checking Account  
 Personal Savings Account    Corporate/Organization Savings Account

**B. Other Account Verification.** A preprinted cancelled or voided check is required for processing.



**Alternative acceptable documentation for accounts without checks:**

- Preprinted deposit slip, which includes account title, account number, account type and ACH Transit Routing Number; or
- A letter from your financial institution, signed by an officer, on its letterhead, which includes account title, account number, account type and ACH Transit Routing Number.

**C. ACH Authorization for Other Account.** (Authorizing transfers to and from the Other Account)

By signing Section 7, as applicable, I/we, each of the registered holders of the Other Account specified above, authorize Charles Schwab & Co., Inc. ("Schwab") to act upon the instructions of any Schwab Account holder and, if authorized in Section 3, the Schwab Account holders' Investment Advisor named above to: (i) initiate credit entries to the Other Account and to credit that account; (ii) initiate debit entries to the Other Account and to debit that account; and (iii) initiate reversals to the Other Account of erroneous or duplicate credit or debit entries and to credit or debit the Other Account as appropriate. I/We agree to jointly and severally indemnify and hold Schwab harmless for any liabilities occurring as a result of Schwab relying on this authorization or instructions given pursuant to it. I/We acknowledge that these transactions shall be governed by the Rules of the National Automated Clearing House Association and other applicable rules or regulations, and agree to abide by such rules. **I/We agree to settle by binding arbitration any dispute involving Schwab which may arise with respect to the MoneyLink Service.** This authorization will remain in full force and effect until Schwab has received notification of its termination, such notice which may be provided by any of the registered holders of the Other Account at any time by writing to Charles Schwab & Co., Inc., MoneyLink Support Services, 101 Montgomery Street, San Francisco, CA 94104 or by calling Schwab Alliance at 1-800-515-2157. I/We acknowledge that Schwab must receive this notification in a time and manner so as to give Schwab and the other financial institution a reasonable opportunity to act on it.

For Charles Schwab Use Only

Account Number \_\_\_\_\_ Date Approved (mm/dd/yyyy) \_\_\_\_\_  
 Print Name of Approver \_\_\_\_\_ Signature \_\_\_\_\_



### 3. Investment Advisor Authorization

Complete this section to authorize your IA (WPFA or LPFA) to give Schwab instructions for MoneyLink transactions on your behalf (and on behalf of any other holder[s] of the Other Account).

**At least one Schwab Account holder must initial below. (An X is not sufficient.) Only Schwab Account holders, not holders of the Other Account, may initial this authorization.**

_____ Acct. Holder/Trustee/ Custodian	_____ Add'l Account Holder/ Co-Trustee	_____ Add'l Account Holder/ Co-Trustee	<b>IA MoneyLink Authorization.</b> I/We authorize Schwab to electronically transfer funds between my Schwab Account and the Other Account specified above as instructed by my IA. My IA's authority includes giving Schwab instructions on my behalf and changing existing instructions for one-time (on-request) transfers, IRA contributions and recurring transfers, stopping transfers, canceling the Service, and re-establishing the Service as it was before cancellation within 60 days of cancellation. My IA's authority does <i>not</i> include enrolling other Schwab Accounts or Other Accounts in the Service. The authority I am granting to my IA is subject to the Terms and Conditions of the Service and this Authorization Form. I understand that this authorization only allows my IA to provide MoneyLink instructions between my Schwab Account and the Other Account, and does not enable my IA to instruct Schwab to make other types of disbursements from my Schwab Account (for example, wire, journal or check requests).
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### 4. Recurring Transfers

**Complete this section to set up recurring transfers (in addition to on-request transfers) between the Schwab Account and the Other Account.**

Choose one:  Into my Schwab Account  Out of my Schwab Account

Transfer amount \$ \_\_\_\_\_

Start date: **Please select one and indicate your preferred start date. (Start date must be at least three weeks from the day this form is received by Schwab.)**

- Weekly, every (M, T, W, Th, F) \_\_\_\_\_, beginning (mm/dd/yyyy) \_\_\_\_\_
- Semi-monthly, beginning on 1st Transfer Date: \_\_\_\_\_ and 2nd Transfer Date: \_\_\_\_\_
- Monthly, beginning: \_\_\_\_\_
- Monthly, last business day of each month, beginning: \_\_\_\_\_
- Quarterly, beginning: \_\_\_\_\_
- Semi-annually, beginning: \_\_\_\_\_
- Annually, beginning: \_\_\_\_\_
- Every \_\_\_\_\_ calendar days (3 to 364) beginning (mm/dd/yyyy) \_\_\_\_\_

Please note that transfer requests exceeding \$100,000 may be processed in multiple increments up to the total amount.

### 5. IRA Contributions

**Note:** MoneyLink is not available for SEP-IRA, SIMPLE IRA, 403(b)(7), Schwab Individual 401(k) or Qualified Retirement Plan (QRP) accounts.

Recurring contribution will begin for the tax year: \_\_\_\_\_

Your Annual Contribution Limit (up to the maximum amount allowed by law): \$ \_\_\_\_\_

Schwab will automatically discontinue deposits into your Schwab IRA for a given contribution year when you reach this annual contribution limit. If you do not specify a limit, we will automatically establish your limit up to the maximum amount allowed by law at the time the Service is set up, assuming you are under 50 years of age and your compensation exceeds other limits on your IRA contribution. Your transfer schedule will be reactivated in January of the next contribution year.

**For IRA distributions, please use the Schwab Institutional® IRA & ESA Distribution Form.**

**6. Please Read**

By signing Section 7, I agree that:  
I authorize the electronic transfer of funds between my Schwab Account and the Other Account specified above subject to the provisions of this Authorization Form, the Electronic Funds Transfer Terms and Conditions for the Service (which will be mailed to me once this Authorization Form has been processed)\* and my Schwab One® Account Agreement (collectively, the "Terms and Conditions"), which will govern all transactions initiated under the Service. My use of such Service will confirm that I have received, reviewed and agreed to be bound by the Terms and Conditions, including, without limit, any amendments, until I (or my IA, if authorized)

cancel the Service in accordance with these Terms and Conditions. Schwab may rely completely on the account numbers specified above and shall have no obligation to verify account registration information. If my Schwab Account is an IRA, I understand that the IA's actions under the authority granted herein may affect my federal (and possibly state) income taxes. If my Schwab Account is a custodial account, I acknowledge and agree that any funds or securities transferred out of the Schwab Account shall be used or applied solely for the benefit of the minor. Schwab may also require that I provide appropriate documents to set up MoneyLink for trust, corporate, partnership, sole proprietor or other organization accounts.

I understand that certain account types may require customer service assistance to initiate one-time transfer requests. This Service may be cancelled at any time upon request of any registered holder of the Schwab Account or the Other Account (or by my IA, if authorized above) by writing Charles Schwab & Co., Inc., MoneyLink Support Services, 101 Montgomery Street, San Francisco, CA 94104 or calling Schwab Alliance at 1-800-515-2157. Schwab reserves the right, at its sole discretion, to require such cancellation requests to be in writing. **Please note that your Account Agreement with Schwab contains a predispute arbitration agreement. You may contact us for a copy.**

\*Once you have been enrolled in MoneyLink, you will receive a confirmation letter with Electronic Funds Transfer Terms and Conditions. If you do not receive this information within three weeks, please contact your Investment Advisor.

**7. Signature(s) Required**

**A. Schwab Account Holders**

At least one Schwab Account holder must sign.  
By signing below, I acknowledge my agreement to all of the terms and conditions contained herein.

▶ _____ Schwab Account Holder/Trustee/Custodian	_____ Print Name	Date _____ (mm/dd/yyyy)
▶ _____ Additional Schwab Account Holder/Co-Trustee	_____ Print Name	Date _____ (mm/dd/yyyy)
▶ _____ Additional Schwab Account Holder/Co-Trustee	_____ Print Name	Date _____ (mm/dd/yyyy)

**B. Other Financial Institution Account Holders**

ALL account holders of the Other Account (other than those who signed in section A) must sign.  
By signing below, I acknowledge my agreement with the terms and conditions set forth in Section 2C. For corporate, partnership, sole proprietor or other organization accounts, see Section 2 for additional requirements.

▶ _____ Other Account Holder	_____ Print Name	Date _____ (mm/dd/yyyy)
▶ _____ Additional Other Account Holder	_____ Print Name	Date _____ (mm/dd/yyyy)
▶ _____ Additional Other Account Holder	_____ Print Name	Date _____ (mm/dd/yyyy)

For Charles Schwab Use Only _____ Account Number
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